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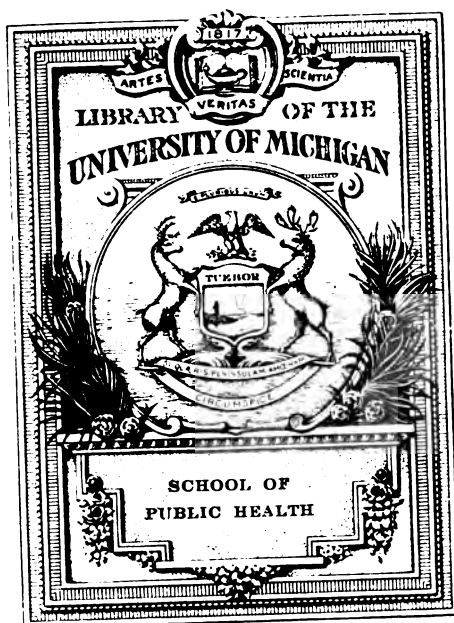
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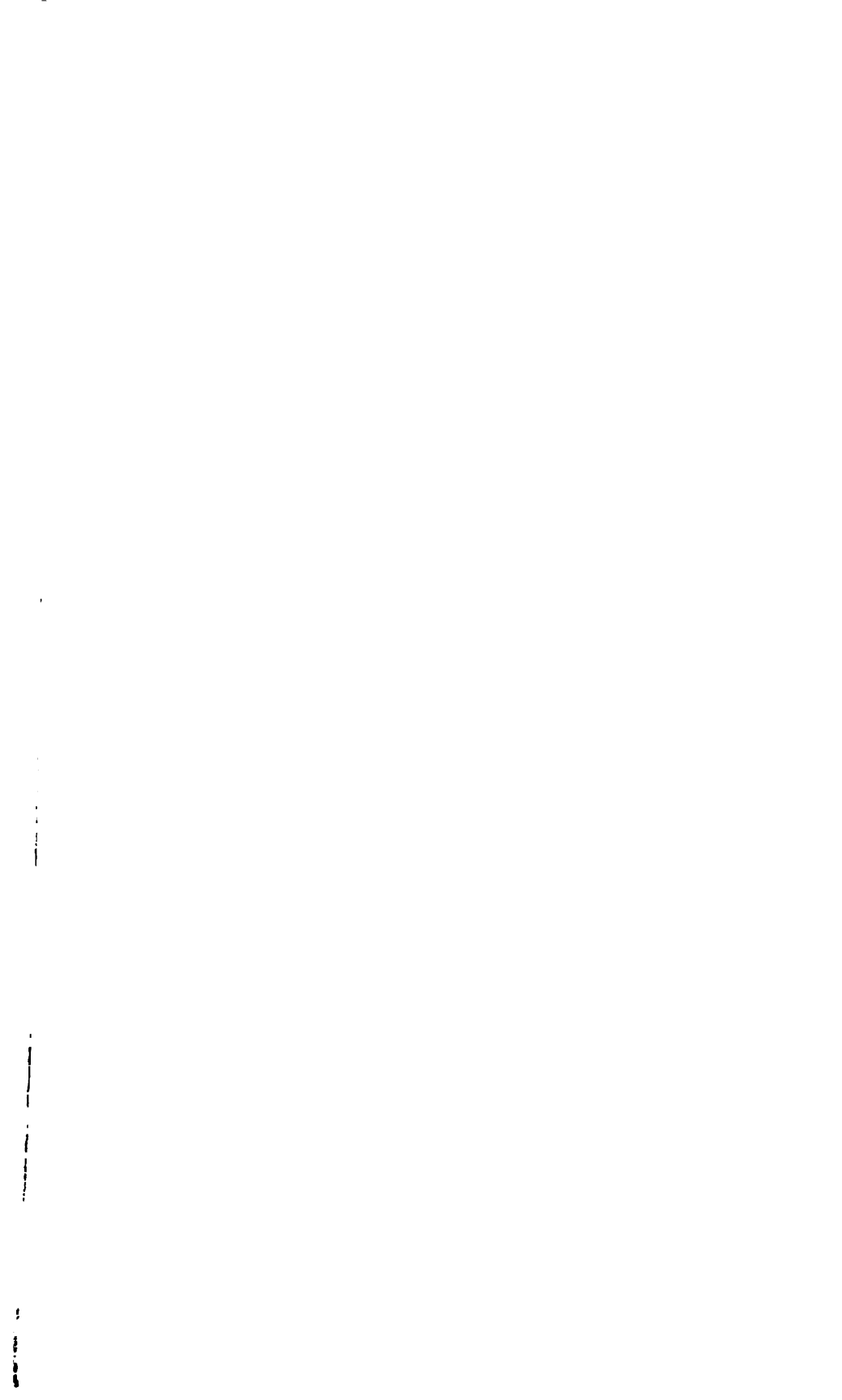
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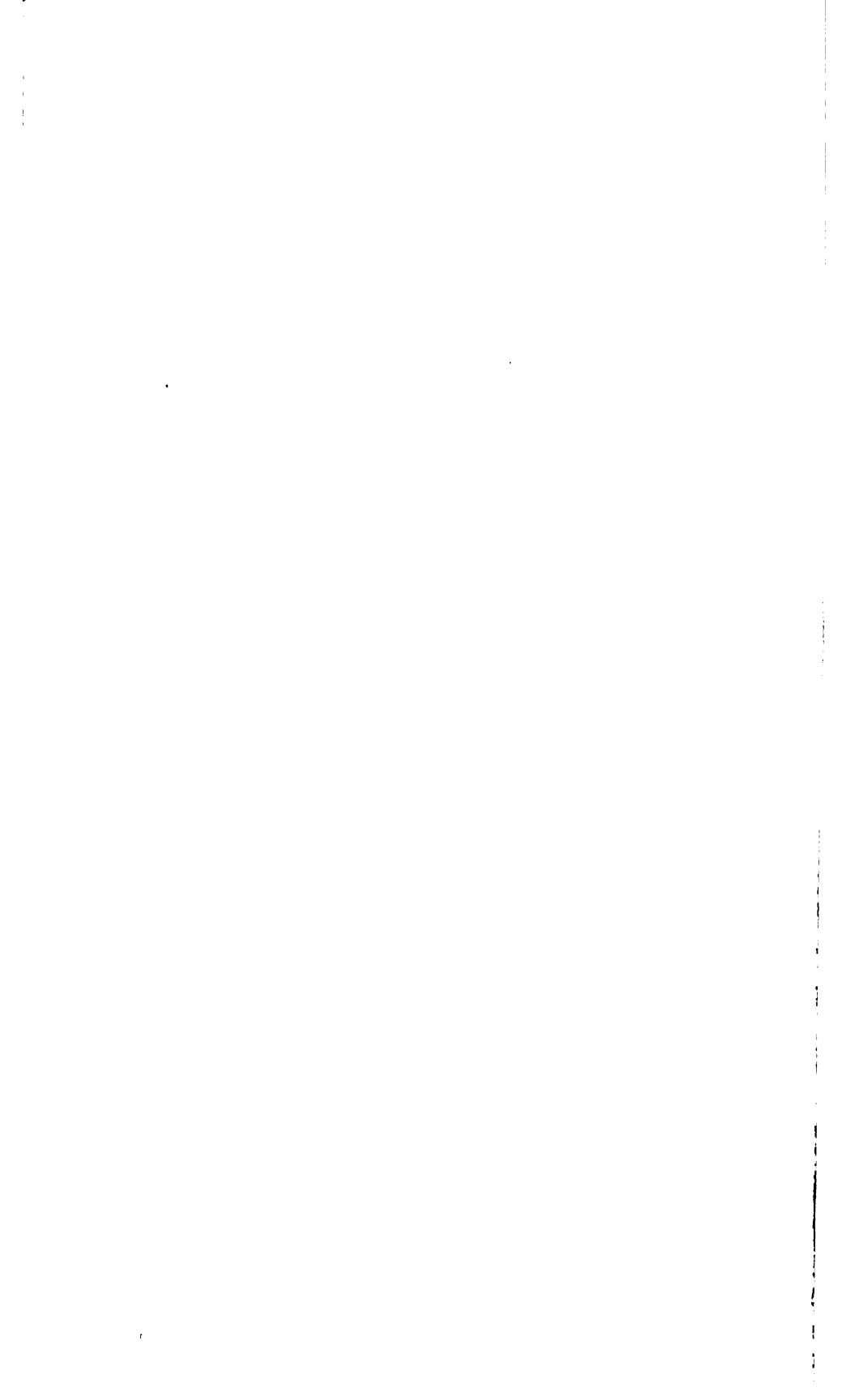


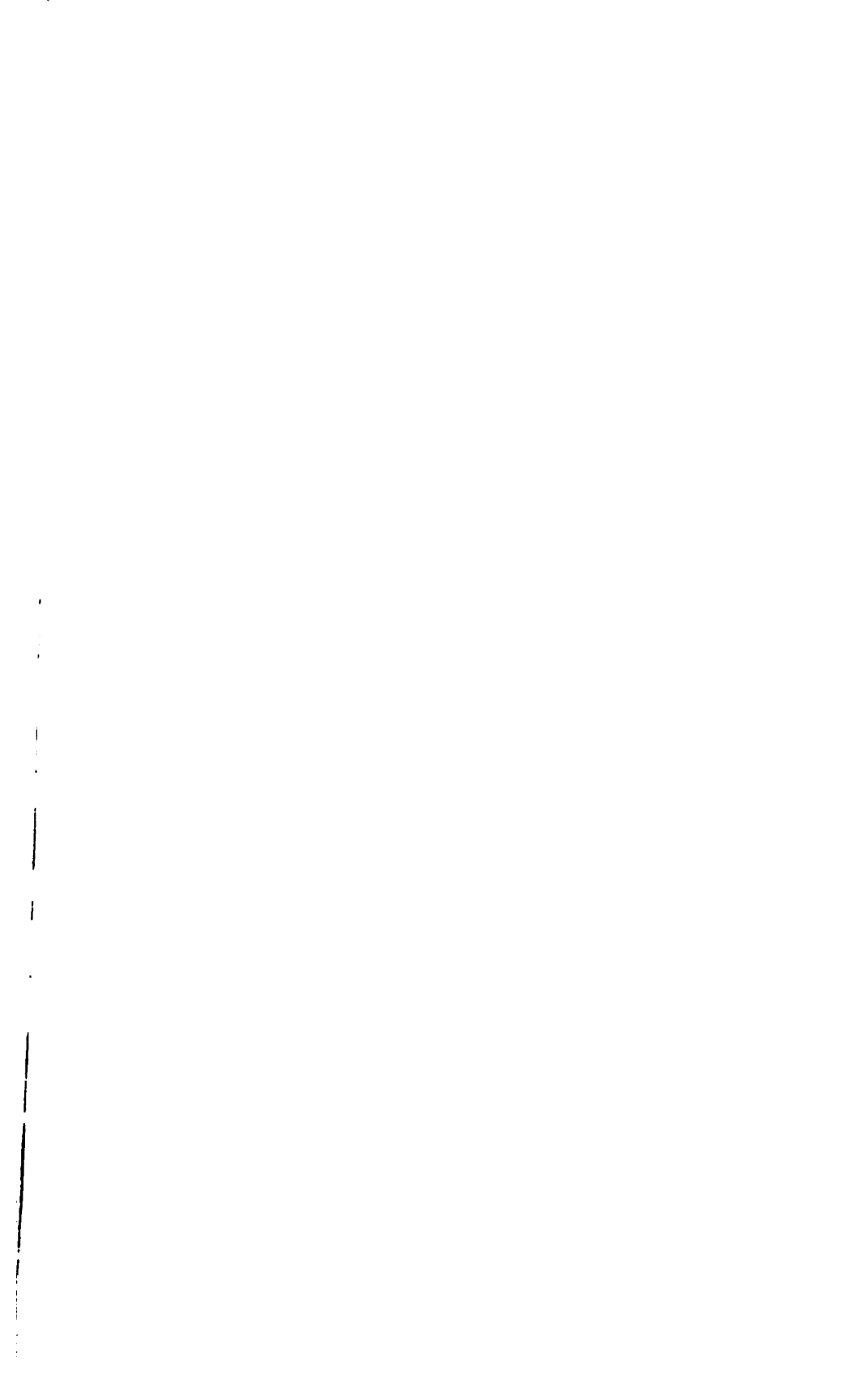


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CHILDREN'S BUREAU  
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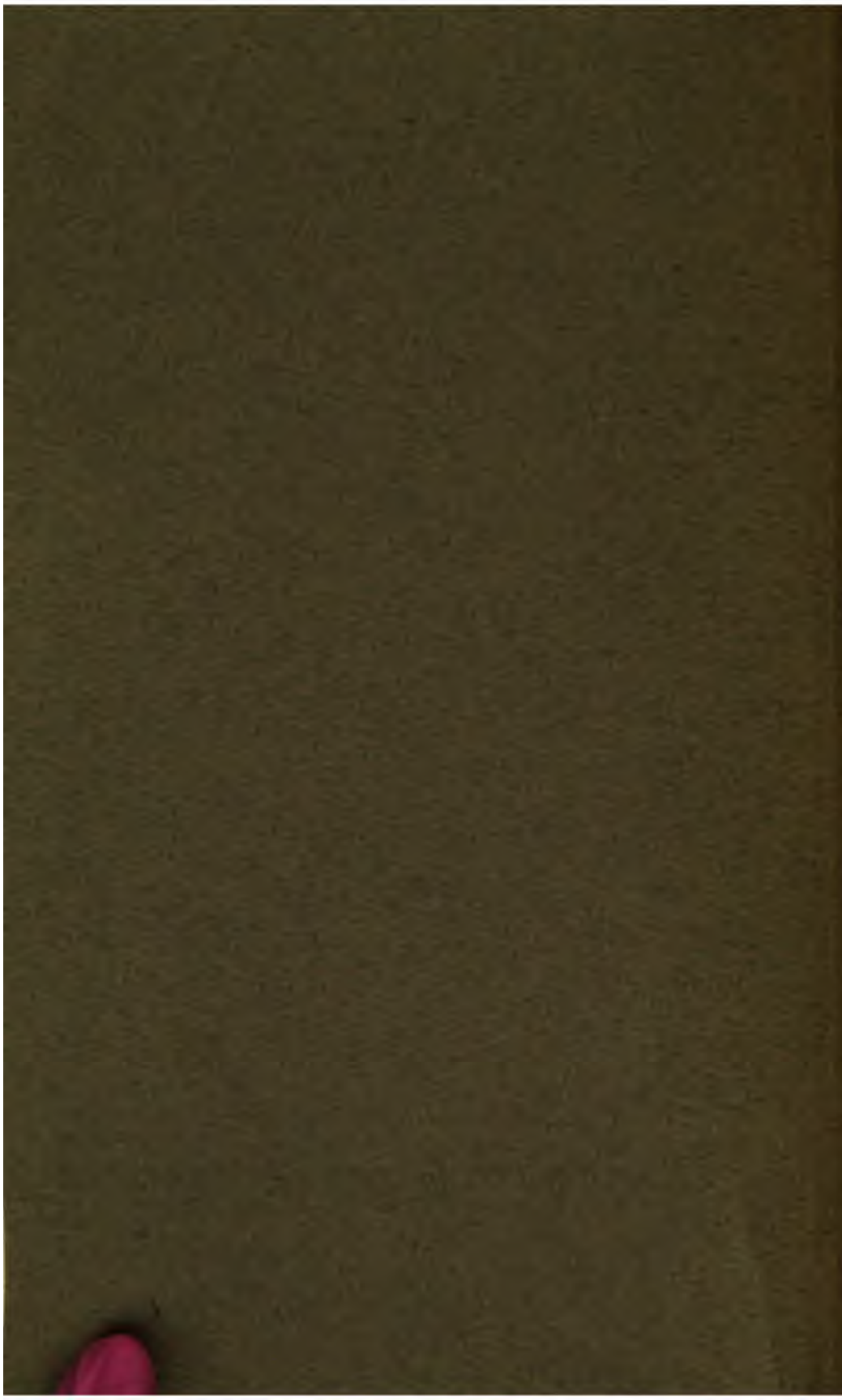
A TABULAR STATEMENT OF  
INFANT-WELFARE WORK BY PUBLIC  
AND PRIVATE AGENCIES IN THE  
UNITED STATES

BY  
ETHEL H. LINDEN

STANDARD STATISTICAL PUBLICATIONS  
BUREAU OF LABOR STATISTICS  
WASHINGTON, D. C.



GOVERNMENT PRINTING OFFICE





U. S. DEPARTMENT OF LABOR

U. S. CHILDREN'S BUREAU

JULIA D. KATHLIN, CHIEF

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INFANT WELFARE WORK BY PUBLIC  
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UNITED STATES

BY

ETTA R. GODWIN

INFANT MORTALITY SERIES No. 5

Series 5-12-1916, No. 11



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## PUBLICATIONS OF THE CHILDREN'S BUREAU.

### Annual Reports:

- First Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1913. 20 pp. 1914.  
Second Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1914. 19 pp. 1914.  
Third Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1915. 26 pp. 1915.

### Care of Children Series:

- No. 1. Prenatal Care, by Mrs. Max West. 41 pp. 3d ed. 1913. Bureau publication No. 4.  
No. 2. Infant Care, by Mrs. Max West. 87 pp. 1914. Bureau publication No. 8.

### Dependent, Defective, and Delinquent Classes Series:

- No. 1. Laws Relating to Mothers' Pensions in the United States, Denmark, and New Zealand. 102 pp. 1914. Bureau publication No. 7.  
No. 2. Mental Defectives in the District of Columbia: A brief description of local conditions and the need for custodial care and training. 39 pp. 1915. Bureau publication No. 13.

### Infant Mortality Series:

- No. 1. Baby-saving Campaigns: A preliminary report on what American cities are doing to prevent infant mortality. 93 pp. 4th ed. 1914. Bureau publication No. 3.  
No. 2. New Zealand Society for the Health of Women and Children: An example of the methods of baby-saving work in small towns and rural districts. 19 pp. 1914. Bureau publication No. 6.  
No. 3. Infant Mortality: Results of a field study in Johnstown, Pa., based on births in one calendar year, by Emma Duke. 93 pp. and 9 pp. illus. 1915. Bureau publication No. 9.  
No. 4. Infant Mortality in Montclair, N. J.: A study of infant mortality in a suburban community. 36 pp. 1915. Bureau publication No. 11.  
No. 5. A Tabular Statement of Infant-Welfare Work by Public and Private Agencies in the United States. 114 pp. 1916. Bureau publication No. 16.

### Industrial Series:

- No. 1. Child Labor Legislation in the United States, by Helen L. Sumner and Ella A. Merritt. 2 charts. 1131 pp. 1915. Bureau publication No. 10.  
Analytical tables of laws of all States and text of laws of each State.  
No. 2. Administration of Child Labor Laws:  
Part 1. Employment Certificate System, in Connecticut. 69 pp. 2 charts. 1915. Bureau publication No. 12.

### Miscellaneous Series:

- No. 1. The Children's Bureau: A circular containing the text of the law establishing the bureau and a brief outline of the plans for immediate work. 5 pp. 1912. Bureau publication No. 1.  
No. 2. Birth Registration: An aid in preserving the lives and rights of children. 20 pp. 3d ed. 1914. Bureau publication No. 2.  
No. 3. Handbook of Federal Statistics of Children: Number of children in the United States, with their sex, age, race, nativity, parentage, and geographic distribution. 106 pp. 2d ed. 1914. Bureau publication No. 5.  
No. 4. Child-Welfare Exhibits: Types and preparation, by Anna Louise Strong, Ph. D. 58 pp., 16 illus. 1915. Bureau publication No. 14.  
No. 5. Baby Week Campaigns. Suggestions for communities of various sizes. 64 pp. 1915. Bureau publication No. 15.



~~Public Health~~  
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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,  
*Washington, D. C., April 6, 1916.*

SIR: I transmit herewith a tabular statement of infant-welfare work by public and private agencies in the United States. In preparing a discussion of this subject it was found necessary to divide the material into two reports. The first consists of the tabular statement presented herewith and the second will give a detailed description of the most significant instances of public and private infant-welfare work. The tabular statement is published in advance because of its general interest as a comparative presentation of State, municipal, and volunteer agencies throughout the United States. It is to be noted that the activities listed in this tabulation are concerned chiefly with safeguarding the health of well children; not with the treatment of sick children.

The tabulation indicates the nation-wide extent of the movement to protect infant life. Nothing short of a revolution is taking place in the attitude of physicians and social students. They increasingly urge constructive measures for preserving health and for stimulating and improving home care. Emphasis is placed upon the absolute necessity of providing sound instruction in the hygiene of infancy and childhood and of making it convenient for parents to secure information as to the healthful regimen for the individual child. Systems are in course of development for providing such examinations and tests of well children as will enable parents to forestall disease. As will be seen, public authorities and private agencies are working out practical methods in various phases of the whole problem.

The work of collecting and tabulating the information has been done by Mrs. Etta R. Goodwin, assisted by Miss Dorothy Henderson, under the general direction of Dr. Grace L. Meigs, head of the division of hygiene.

Very respectfully,

JULIA C. LATHROP, *Chief.*

HON. WILLIAM B. WILSON,  
*Secretary of Labor.*



# **A TABULAR STATEMENT OF INFANT-WELFARE WORK IN THE UNITED STATES.**

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## **INTRODUCTORY.**

The report which follows represents an effort to outline the extent of the work carried on in the United States for the reduction of infant mortality. It presents, for each State and for each city of 10,000 population and over according to the census of 1910, a statement of the civic measures adopted for the reduction of the infant death rate, and indicates the infant-welfare work by private agencies in these cities and characteristic work in some smaller communities. Full descriptions of the methods used by both public and private agencies will be furnished in another report now in preparation.

In collecting the information, schedules or inquiries were sent out early in 1915. These were addressed to the State health officers in all States, to the secretaries of all State colleges and universities, to health officers in cities of 10,000 population and over, and to private agencies on lists courteously supplied by Miss Ysabella Waters, chairman of the membership committee of the National Organization for Public Health Nursing, and author of "Visiting Nursing in the United States"; by the American Association for the Study and Prevention of Infant Mortality; and by the American National Red Cross Town and Country Nursing Service. In this initial report a complete and original census of all phases of infant-welfare work by private agencies was not regarded as practicable. The choice of agencies addressed is the result of the investigations of individuals and agencies in close touch with infant-welfare activities in all sections of the country.

## **STATE BOARDS OR DEPARTMENTS OF HEALTH.**

Four States—Kansas,<sup>1</sup> New Jersey,<sup>1</sup> New York, and Ohio<sup>1</sup>—reported distinct divisions of their State departments of health dealing specifically with problems of infant and child hygiene. In Massachusetts infant-welfare work is a well-defined feature of the work of the division of hygiene.

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<sup>1</sup> Division organized subsequent to January, 1915. Infant-welfare work developed since that date not shown in this report.

*Infant-welfare work by State*

State.	Work for promotion of birth registration.	Educational work on the subject of infant hygiene.	
		Pamphlets, leaflets, etc.	Exhibits, lantern slides, motion pictures, etc.
Alabama.....	Space given in bulletins to discussion of importance.	Pamphlet, On the Baby..	Lantern slides on infant hygiene.
Arizona.....	1 number monthly bulletin (July, 1914) devoted to question.		
Arkansas.....	Cooperation with child-welfare associations in such effort.		
California.....	Efforts directed toward passage of good law recently enacted.		General health car; lantern slides.
Colorado.....			Lantern slides; motion-picture films.
Connecticut.....	Interest stimulated by constant reference to subject in bulletins.		
Delaware.....			
Florida.....	Active campaign; extensive space in bulletins; cartoons; letters to county and city officers, women's clubs, etc.	Pamphlet, Baby Welfare..	Traveling exhibit on public health; panels, models, special section relating to infant hygiene; lantern slides.
Georgia.....	No appropriation for putting in operation good registration law recently passed.	Pamphlets distributed through a mailing list.	Exhibits at various county fairs; lantern slides.
Idaho.....	Literature sent to mother upon registration of a birth.	Leaflets, If You Have a Baby, distributed to mother upon registration of a birth.	Lantern slides on general health.
Illinois.....	Motion picture, Tommy's Birth Certificate, or The Sin of Omission, offered to picture-theater managers gratis; effort toward putting in operation good registration law recently passed.	Pamphlet on the care of the baby.	Traveling exhibit, mechanical and still models, wall cartoons, 100 lantern slides, motion-picture films; sections on infant mortality, flies, etc., booked for months in advance.
Indiana.....	Continual agitation to improve birth registration; search for unreported births and prosecution of delinquent physicians; letter to mother upon registration of a birth.	The Baby Book sent to mother upon registration of a birth; pamphlets and circulars, Summer Care of Babies, Indiana Child Creed.	General health exhibit emphasizing infant hygiene; wall panels, models, 6 motion-picture films, 800 lantern slides.
Iowa.....	Agitation for passage of good registration law.	Reprint of special bulletin, Save the Babies.	Child hygiene exhibit shown at State and county fairs, etc.; electric devices.



departments of health, 1915.

Educational work on the subject of infant hygiene—Continued.					Other work touching on infant hygiene or welfare.
Lectures, by whom given.	Bulletins.		Newspaper articles.		
	How often issued.	Class.	How often issued.	Class.	
Lecturers supplied by State board of health.	Quarterly..	General health.....			Health laws only 2 years old.
do	do	General health; reference to infant hygiene; 1 number on birth registration.			
Lectures by members of State board of health on infant hygiene.	Monthly..	General health.....	From time to time.	Summaries of birth statistics.	Campaign against irregular lying-in hospitals.
do					
	Monthly..	Give space to warnings against patent medicines, etc.; occasional reference to seriousness of infant mortality problem.			
Lecturers supplied by health department.	Monthly..	General health; special birth-registration cartoons.	From time to time.	Articles on general health and vital statistics.	Cooperation with women's organizations in arranging better-babies contests.
Illustrated lectures given by State board of health.	Quarterly..	General health.....	No regular time.	Articles on infant hygiene in city and county papers.	
Lecturers supplied by board of health.			Weekly..	Literature on general health subjects sent to newspapers; stereotype cuts and plates supplied.	
Frequent lectures by members of State board of health with reference to infant hygiene.	Monthly..	General health....	Biweekly..	Plainly written health stories sent to newspapers; definite date of release. Practically every paper in State takes material and publishes in prominent place.	Child-welfare exposition held in Indianapolis, February, 1915.
Lecture force of 4 members of State board of health; special reference to subjects related to infant hygiene.	do	Frequent reference to the welfare of infants.	Weekly..	Letter sent out through press service; general health subjects, frequent mention of infant hygiene.	
	Quarterly..	Profusely illustrated; occasional infant hygiene article.			

*Infant-welfare work by State*

State.	Work for promotion of birth registration.	Educational work on the subject of infant hygiene.	
		Pamphlets, leaflets, etc.	Exhibits, lantern slides, motion pictures, etc.
Kansas..... (Division of Child Hygiene, July 1, 1915.)	Checking system and prosecutions.	Bulletins, Care of Infants, Save the Babies.	General health exhibit, including reference to infant hygiene; motion pictures; lantern slides.
Kentucky.....			General health traveling exhibit.
Louisiana.....	Propaganda through circulars and personal letters toward passage of model law; pamphlet sent and letter written to mother upon registration of a birth.	Pamphlet on How to Keep the Baby Well and leaflets distributed from health exhibit car.	Educational hygiene exhibit train, more than one-sixth of space given to subject of infant welfare; 2 motion-picture films; stereopticon outfit.
Maine.....	Check by clippings from newspapers; leaflets and posters explaining importance.	Series of leaflets on child welfare widely distributed.	Traveling exhibit on child welfare is combined with exhibit on school hygiene.
Maryland.....	Prosecution of physicians and midwives failing to report births; educational pamphlets, leaflets, etc.	Pamphlets, leaflets, etc., on birth registration.	General health car; lantern slides.
Massachusetts.....	Canvassers sent from house to house checking up births; collection of vital statistics under secretary of the Commonwealth.	Educational leaflets, For Mothers with Little Babies, in 3 languages.	Lantern slides; motion-picture films.
Michigan.....	Under secretary of state; system of checking by supervisors of townships or by assessors of cities.		Cartoons and mechanical devices on infant hygiene; lantern slides; general health car.
Minnesota.....	Constant reminders to local registrars; check births by deaths of infants under 1 year and investigate failure to report; weatherproof notice for tacking on trees, showing importance of birth registration.		Have had traveling general health exhibitions on the road at various times since 1907; not sent out during past year.
Mississippi.....	Reference in bulletins.....	Reprint of special bulletins, Protect the Babies, Save the Babies, etc.	Lantern slides on general health.

departments of health, 1915—Continued.

Educational work on the subject of infant hygiene—Continued.					Other work touching on infant hygiene or welfare.
Lectures, by whom given.	Bulletins.		Newspaper articles.		
	How often issued.	Class.	How often issued.	Class.	
Lectures by members State board of health; general health with reference to infant hygiene.	Monthly...	General health; special numbers on child hygiene.	Weekly...	Articles on general health subjects, reaching about 500 weekly newspapers; weekly press letter on child hygiene.	Plans for immediate future include rural surveys; efforts to encourage cities to establish visiting-nurse system.
4 sanitary inspectors in the field, visiting every precinct in many counties, accompanied by health exhibit; no separation of work for children and adults.	do...	General health; issued in editions of 25,000.	Biweekly		
Members State board of health accompany health car sent to rural districts; emphasize importance of infant hygiene.	Monthly and quarterly.	1 issue of monthly bulletin devoted to subject of child hygiene; section in quarterly once yearly on infant hygiene.			
Lecturers from State board of health, accompanied by stereopticon, give talks on child welfare before the granges, at State fairs, etc.	Bimonthly.	General health; special reference to child hygiene.			
	Monthly (for health officers).	No printed bulletins; typewritten statements.			Special study of antenatal mortality; campaign for better report of stillbirths. Plans being made for a campaign for educational work in infant hygiene through exhibits, lectures, bulletins, pamphlets, and newspaper articles; plan to take up question of public-health nursing.
	Monthly...	General health			
	do.....	General health; cartoons referring to infant mortality; special number devoted to infant welfare.			
Lectures by members of State board of health on subject of infant hygiene.				Formerly sent articles to 200 papers throughout State; service temporarily discontinued.	
Lectures by county health officers in schools etc., on infant hygiene.	Monthly...	General health; special numbers, Protect the Babies, Save the Babies.			

*Infant-welfare work by State*

State.	Work for promotion of birth registration.	Educational work on the subject of infant hygiene.	
		Pamphlets, leaflets, etc.	Exhibits, lantern slides, motion pictures, etc.
Missouri.....	Constant communication with local registrars: personal letters written in case of neglect to report births.		
Montana.....	Prosecution of physicians and midwives failing to report births.		Lantern and slides.....
Nebraska.....	Occasional reference in bulletins.		
Nevada.....			
New Hampshire...	Prosecution of physicians and midwives failing to report births.	Leaflet, Save the Babies' Eyes.	Lantern slides on milk...
New Jersey..... (Division of Child Hygiene and Nursing, Nov. 1, 1915).	State board of health has power to compel local boards to prosecute delinquent physicians or midwives.		Traveling exhibit on tuberculosis, with some reference to care of babies; motion-picture machine.
New Mexico.....			
New York..... (Division of Child Hygiene, Jan. 2, 1914).	Posters, etc.; panels in traveling exhibit; notification card and pamphlet, Your Baby—How to Keep It Well, sent to mother upon registration of a birth; numerous devices for making it convenient for physicians to comply with requirement.	Pamphlet, How to Save the Babies; circulars of information, Before the Baby Comes, The New-born Baby, The Food of a Baby, The Summer Care of Baby, Care of Milk in the Home, From the Bottle to Table Food, Avoiding Infection, Your Baby—How to Keep It Well (3 languages); Infant-welfare Campaigns and Infant-welfare Stations (pamphlet giving information helpful to communities wishing to establish infant-welfare stations).	3 traveling exhibit units (20 panels, infant-welfare station, etc.), each in charge exhibit manager, trained nurse, and mechanic, in special campaign in 1914 visited 45 cities and villages and 55 county fairs, with object of encouraging establishment of infant-welfare stations in the smaller communities.
North Carolina.....	Booklet, Why Register Births and Deaths, distributed; frequent mention in bulletins; letters to mother from governor and State health officer upon registration of a birth.	Pamphlet, The Baby; leaflet on How to Keep Your Baby Well.	Exhibit with 1 section on Care and Feeding of Infants; health exhibit connected with baby contest at State fair; lantern slides on infant hygiene.
North Dakota.....			

departments of health, 1915—Continued.

Educational work on the subject of infant hygiene—Continued.					Other work touching on infant hygiene or welfare.
Lectures, by whom given.	Bulletins.		Newspaper articles.		
	How often issued.	Class.	How often issued.	Class.	
	Quarterly	General health; occasional article on infant hygiene.			Better - babies contest at State fair.
	Monthly	General health		Child-welfare department organized temporarily with trained nurse in charge, for work with women's clubs.	
	Quarterly	General health; occasional articles on infant hygiene.			
Lecturers supplied by board of health.	Quarterly	General health			
Department of health lecturers in tuberculosis campaign incidentally emphasize principles involved in care of babies.	Monthly	do	Weekly	General health	
Director division child hygiene, during infant-welfare campaign, delivered several addresses a week; 3 lecturers from division of publicity and education accompany exhibit.	Monthly	Sections in bulletins on infant welfare campaigns, management of infant-welfare stations, Little Mothers' Leagues, care of baby, etc.	Weekly press service.	News bureau; copy and special cuts supplied for newspapers during tour of traveling exhibit; press service, 500-word health hints on such topics as "Infant feeding" mailed in "bottle plate," stereotyped and ready to be placed in forms.	State campaign with object of organizing infant - welfare stations in cities and rural districts; traveling exhibits viewed by 1,300,000 people in 45 cities and small villages and at 55 county fairs; baby-health conferences; 2 motion-picture films, Care of Babies and Improvement of Milk Supply; special meetings for mothers; homes visited; nurses address school children, establish Little Mothers' Leagues.
	do	Section on infant hygiene; cartoons and illustrations.	Weekly	Newspapers of State supplied with regular un-technical articles on health subjects.	100,000 pieces of literature on general health distributed.
Occasional lectures by health officer.	Quarterly	Sections on care of children.			

*Infant-welfare work by State*

State.	Work for promotion of birth registration.	Educational work on the subject of infant hygiene.	
		Pamphlets, leaflets, etc.	Exhibits, lantern slides, motion pictures, etc.
Ohio..... (Division of Child Hygiene, Oct. 1, 1915.)	Through public-health exhibit, motion pictures, etc.	Pamphlet on infant hygiene.	Traveling exhibit, including motion pictures, sections devoted to subject of infant hygiene, and 1,500 lantern slides taken to smaller cities and towns and county fairs; large portion of rural communities of the State have been reached.
Oklahoma.....		Booklet addressed to mothers.	Lantern slides.....
Oregon.....	Effort directed toward putting in operation good law recently passed.		do.....
Pennsylvania.....	Checking-up system and prosecutions.	Pamphlet, Save the Baby.	Infant - welfare exhibit, portion of general-welfare exhibit; statistical material, mottoes, motion pictures; help given to municipalities wishing to establish exhibits.
Rhode Island.....		Pamphlet, Care of Babies; leaflet, How to Take Care of Babies.	Milk and mouth hygiene exhibit; lantern slides; motion-picture films.
South Carolina.....	Effort directed toward putting in operation good law recently passed.		Lantern slides.....
South Dakota.....		The Mother's Book published and distributed.	
Tennessee.....			General health exhibit, charts, motion pictures, lantern slides.
Texas.....	Importance emphasized in the monthly bulletin, also by efforts at prosecution of physicians and midwives failing to report births.		Public health exhibit car, of which infant hygiene is special feature.
Utah.....	Circulars sent to mother upon registration of a birth.	Circular teaching infant hygiene.	General health exhibit; lantern slides.
Vermont.....			Motion - picture films; electrical generator for use in operating motion-picture apparatus; lantern slides.

departments of health, 1915—Continued.

Educational work on the subject of infant hygiene—Continued.					Other work touching on infant hygiene or welfare.
Lectures, by whom given.	Bulletins.		Newspaper articles.		
	How often issued.	Class.	How often issued.	Class.	
Lectures given in connection with traveling health exhibit; certain part devoted to subject of infant mortality.	Monthly...	General health...			Summer campaigns by department of health for lessening infant mortality.
Lecturers supplied by department of public health.			Weekly...	Letter on general health matters; arrangements being perfected for beginning this service.	
Lectures by members of State board of health, with some reference to infant hygiene.	Quarterly...	General health...		Reporters of various papers visit office of State health officer every day and obtain material for articles.	
Lecturers from department of health accompany infant-welfare exhibit.	Monthly...		Weekly...		
Members of State board of health give lectures to mothers' clubs; 4 weeks' series of lectures to the foreign population, 1 lecture each week on care of infant.	Quarterly...	General health...			
Lectures by members of State board of health.					Infant hygiene dwelt upon by field workers in hookworm work.
	Quarterly...	General health...			
Members of State board of health give lectures on general health subjects.	...do...	Food...		Educational articles on general health subjects.	
Field workers in hookworm work touch upon matter of infant mortality.	Monthly...	Frequent reference to infant hygiene.	From time to time.	In weekly newspapers; general health subjects.	
Lectures by members of State board of health; general health subjects.	...do...	Statistical statements; occasional bulletins to health officers.			
Lectures by members of State board of health at baby shows, parent - teachers' association meetings, etc.	Quarterly...	General health...	Occasionally.	Articles on general or specific subjects of public health.	

*Infant-welfare work by State*

State.	Work for promotion of birth registration.	Educational work on the subject of infant hygiene.	
		Pamphlets, leaflets, etc.	Exhibits, lantern slides, motion pictures, etc.
Virginia.....	Notification card and copy of bulletin, Care of Infants, sent to mother upon registration of a birth. Numerous cartoons in bulletins.	Reprint bulletins, The Care of Infants, and Mother and Child; Health Handbook for Colored People, Catechism of Public Health, Virginia Health Almanac.	General health exhibit; section on infant welfare; motion pictures; lantern slides.
Washington.....	Frequent mention in bulletins; sections in exhibit; lectures sent to secure cooperation of club women.	Pamphlets issued by United States Public Health Service, etc., distributed.	Exhibits on general health subjects, section on infant hygiene, shown at county fairs, etc.; lantern slides.
West Virginia.....	Effort toward having law amended.	Special bulletins on child hygiene.	.....
Wisconsin.....	Notification card and bulletin, Save Your Baby, sent to parents upon registration of a birth; publicity work through 6 deputy State health officers; local registrars instructed to report failures to file certificates.	Pamphlet, Save Your Baby; reprint special bulletins.	Models; motion-picture films, slides; 125 charts on health.
Wyoming.....	.....	.....	.....

As shown in this statement, of the 48 State boards or departments of health from which replies were received, all except 4 reported that they had been able to give some attention to the question of infant welfare as a distinct feature of health work. The reports show, however, that several States are obliged to limit this work to references in their monthly bulletins.

Birth registration is now recognized as an indispensable factor in infant-welfare work. Growing interest in effective registration is indicated by the fact that six States have been added within the last two years to those having laws founded upon the so-called "Model law" for the registration of births and deaths. Work for the improvement of birth registration was reported by 36 States.

Pamphlets, leaflets, etc., on infant care, according to the reports, are distributed by State departments or boards of health in 26 States. The importance of the exhibit as an aid in the educational work of



departments of health, 1915—Continued.

Educational work on the subject of infant hygiene—Continued.					Other work touching on infant hygiene or welfare.
Lectures, by whom given.	Bulletins.		Newspaper articles.		
	How often issued.	Class.	How often issued.	Class.	
Frequent lectures on care of infants by State board of health officials.	Monthly...	Special, Care of Infants; Mother and Child.	Weekly...	In form of 2 articles on general health subjects, 1 with definite release date, other as a "filler" to be used at discretion.	Publish Family Almanac and by means of fables and sketches drive home some health lesson applicable to each month.
Series of lectures by members of State board of health; commissioner has given about 100 lectures; infant hygiene emphasized.	.....do.....	General health, special on Birth Registration, etc.	.....	.....	
Occasional lectures by members of State board of health.	Quarterly..	Special on child hygiene; cartoons.	.....	.....	
Lectures by 5 deputy State health officers.	.....do.....	Special, Save Your Baby; frequent reference to importance of breast feeding, prevention of infant blindness, etc.	.....	.....	
.....	.....	.....	.....	.....	

State boards of health is generally recognized, as is made evident by the fact that 25 States now have exhibits with special panels, models, or contrivances relating to infant hygiene. It is estimated that the traveling exhibit of the New York State Department of Health, which was sent out as a part of the infant-welfare campaign in 1914 with the special purpose of stimulating communities to organize infant-welfare stations in cities and in rural districts, was viewed by 1,300,000 people.

The State boards or departments of health in 32 States reported that lecturers are supplied for talks on general health subjects, including infant hygiene. California, Louisiana, Maryland, Michigan, and Texas have, as a development of general health work, cars with special infant-welfare features.

## EXTENSION DIVISIONS OF STATE UNIVERSITIES.

Inquiries concerning the work of extension divisions of State colleges and universities in teaching infant care and hygiene were sent to 72 State institutions enumerated in Table 13 of the report of the Commissioner of Education for the year ended June 30, 1914. Of these, 32 reported no infant-welfare work and 9 made no response to the inquiry. A brief summary of the 31 answers received from the institutions reporting any work of this nature is presented in the following statement:

## WORK BY STATE UNIVERSITIES TO PROMOTE INFANT WELFARE.

University of Arkansas, Fayetteville.	Some work in small towns and rural communities by workers in domestic science.
University of California, College of Agriculture, Berkeley.	Exhibit and lectures on flies. Chapter in extension course in Rural Public Health on "The farm baby."
Florida State College for Women, Department of Home Economics, Tallahassee.	Lessons in infant feeding and care of infants in course on home economics. One or two lessons on infant feeding in prize winners' short course to canning-club girls.
University of Idaho, Department of Home Economics, Moscow.	Lectures on infant feeding.
Indiana University, Extension Division, Bloomington.	Traveling exhibit of eight screens of six panels suggesting what any community can do for itself and its children. Child welfare given a place in suggested programs for community institutes.
Purdue University, Department of Agricultural Extension, Home Economics Department, Lafayette, Ind.	Lectures before women's clubs, mothers' club meetings, and farmers' institutes on infant feeding, hygiene of infancy, clothing, and general health subjects. Models of infants' clothing, pictures dealing with infant feeding.
Iowa State College of Agriculture and Mechanic Arts, Home Economics Department, Ames.	Regular lectures on feeding, clothing, and general care of children. Charts on child hygiene. Models of infants' clothing.
State University of Iowa, Extension Division, Iowa City.	Lecturer and child-welfare exhibit sent to communities where baby-health contests and conferences are held and to meetings of child-welfare associations. Physicians recommended for conducting baby health conferences and contests.
Kansas State Agricultural College, Cooperative Extension Work in Agriculture and Home Economics, Manhattan.	No definite infant-welfare work. Infant hygiene touched upon in addresses of the four women lecturers employed by department of home economics.
University of Kansas, Extension Division, Lawrence.	Exhibits showing surveys of Lawrence and Belleville; 200 square feet of wall space. Motion pictures and slides. Lecturers. Literature.

State University of Kentucky, College of Agriculture, Department of Home Economics, Lexington.	Extension work for infant and child welfare in rural communities and small towns through lectures by teaching staff of department of home economics.
Maryland Agricultural College, College Park.	Lectures on infant hygiene and child hygiene at short courses.
University of Michigan, Extension Service, Ann Arbor.	Prenatal care made the subject of several extension lectures.
University of Minnesota, Department of Home Economics, Minneapolis.	Extension courses in home economics which deal with questions of food and nutrition, home management, and infant feeding.
Mississippi Agricultural and Mechanical College, Home Economics Department, post office Agricultural College.	Attention given to infant feeding in connection with lectures and demonstrations.
University of Nebraska, College of Agriculture, Home Economics Division, University Farm, Lincoln.	As a feature of one of the short courses, a part of one afternoon devoted to the care and feeding of children. Illustrative material and a series of charts used.
(Women's Club Department)..	Lectures at farmers' institute meetings and short courses on care of children.
	Outlines on care and feeding of children (including that of infants) sent to women's clubs as a course of study.
University of North Carolina, Department of Rural Economics and Sociology, Chapel Hill.	Prominence given to problems of infant hygiene in suggestions contained in syllabus of county-club home studies.
North Dakota Agricultural College, Extension Division, <sup>1</sup> post office Agricultural College.	Lectures on infant hygiene, by graduate nurse, in small towns and rural communities.
Ohio State University, Home Economics Department, Columbus.	Infant-welfare work carried on in connection with the "one-week movable schools" for village and farm women. <sup>2</sup>
Ohio University, Extension Department, Athens.	Lectures, many of them illustrated, on the subject of home welfare, nursing, and sanitation, with special reference to the child.
Oklahoma Agricultural and Mechanical College, School of Home Economics, Stillwater.	Arranges baby contests.
Oregon Agricultural College, School of Home Economics, Corvallis.	Sessions devoted to child welfare as a feature of farmers' institutes and extension service. Lectures at chautauquas on care of infants. Extended articles on feeding and care of infants put in hands of country mothers through State Grange.
University of South Carolina, Home Economics Department, Columbia.	Assistance in the establishment of local children's clinics given through lectures. Practical help given at county-fair baby contests.

<sup>1</sup> Organized September, 1915.

<sup>2</sup> Work organized subsequent to spring of 1915.

Winthrop Normal and Industrial College, Home Economics Department, Rockhill, S. C.	Extension work includes formation of home-keepers' clubs for girls and of mothers' circles for the study of the child. Baby contests and conferences arranged. Demonstrations given of sleeping quarters for the child. Equipment necessary for milk modification and feeding charts shown. Literature distributed.
University of Texas, Department of Extension, Division of Home Welfare, Austin.	Supervision of State baby contest. Organize contests and talks at county fairs on care and feeding of children. Talks on infant welfare in connection with one-week school, county rally, health train, and home-improvement car. Outline on child feeding and care arranged for mothers' study clubs. Publicity work by trained newspaper writer. Exhibit consisting of 40 panels on better babies, 10 on child labor. Models and electrical devices. Motion-picture machines; 500 lantern slides; 30 bulletins on general health subjects.
Utah Agricultural College, Extension Division, Social and Home Economics Associations Department, Logan.	Conducted a housekeepers' conference using as a keynote the subject of child welfare.
University of Utah, Extension Division, Salt Lake City.	Lectures and demonstrations on infant hygiene.
University of Vermont, College of Agriculture, Extension Service, Burlington.	Lectures to farm women and children in extension schools on general hygiene.
West Virginia University, College of Agriculture, Department of Home Economics, Morgantown.	Study courses for farm wives' clubs.
University of Wisconsin, Extension Division and Agricultural College, Home Economics Department, Madison.	Bulletins on infant feeding and hygiene and on diseases of the infant. Extensive publicity work. Health articles printed regularly in 330 newspapers. Community, child-welfare, and women's institutes in which much attention is paid to prenatal and infant care. Exhibit; 125 charts on health; section devoted to children requires 75 square feet of wall space. Models and electrical devices. Five motion-picture films; 1,000 lantern slides. The home-economics course offers instruction by correspondence upon the following topics: Care of the prospective mother; disorders and common ailments of pregnancy, and how to avoid them; miscarriage; preparation for confinement; care in lying-in period; the newborn infant; the nursing mother and the hygiene and general care of the newborn, growth and development of the infant.
University of Wyoming, Agricultural College, Demonstration in Home Economics, Laramie.	Illustrated lectures on child feeding. Work with women's clubs in arranging better-babies contests.

## CITIES OF 10,000 POPULATION AND OVER.

Inquiries were sent to health officers in the 599 cities having a population of 10,000 and over according to the census of 1910.<sup>1</sup> No response was received from 44 cities. Of the 555 city health departments replying, 134 reported no work of any character by the departments having a direct bearing on the problem of infant welfare; 255, no infant-welfare work with the exception of city inspection of the milk supply.

The private agencies addressed numbered 448, all of which, with the exception of a few added in the course of the inquiry, were included in the lists supplied to the Children's Bureau.<sup>2</sup> Repeated requests failed to bring responses from 28 of these agencies.

## CITY BUREAUS OR DIVISIONS OF CHILD HYGIENE.

Replies from 20 cities reported distinct divisions or bureaus of child hygiene as branches of the city health departments and supplied the information shown in the accompanying table:

TABLE I.—*Cities having divisions or bureaus of child hygiene as branches of the city health departments.*

City.	Population, 1910.	Title of division.	Year established.
Boston, Mass.	670,585	Division of Child Hygiene.	1911
Buffalo, N. Y.	423,715	Bureau of Child Hygiene.	1910
Chicago, Ill.	2,185,283	Division of Child Hygiene.	1912
Cincinnati, Ohio.	363,591	Child Hygiene Division <sup>1</sup>	1911
Cleveland, Ohio.	560,663	Bureau of Child Hygiene.	1911
		Babies Hospital and Dispensary.	
Detroit, Mich.	465,766	Division of Infant Welfare.	1909
Duluth, Minn.	78,466	Division of Child Welfare.	1911
Jersey City, N. J.	267,779	Division of Child Hygiene.	1914
Kansas City, Mo.	248,381	do.	1911
Los Angeles, Cal.	319,198	Division of Child Welfare.	1910
Milwaukee, Wis.	373,857	Child Welfare Division.	1912
Montclair, N. J.	21,350	Department of Infant Welfare <sup>2</sup> .	1912
Nashville, Tenn.	110,364	Bureau of Infant Welfare.	1910
New York, N. Y.	4,766,883	Bureau of Child Hygiene.	1908
Newark, N. J.	347,469	Division of Child Hygiene.	1913
Philadelphia, Pa.	1,549,008	do.	1910
Pittsburgh, Pa.	533,905	Bureau of Child Welfare.	1914
Providence, R. I.	224,326	Division of Child Hygiene.	1914
Seattle, Wash.	237,194	Child Welfare Division <sup>3</sup> .	1914
Toledo, Ohio.	168,497	Division of Child Welfare.	1915

<sup>1</sup> A subdepartment of the Division of Medical Inspection and Relief.

<sup>2</sup> Work outlined by the infant-welfare committee of the board of health.

<sup>3</sup> Chiefly employed in regulation and improvement of boarding homes for children.

As noted in the table, New York was the first city to establish a separate division of child-welfare work. Detroit was the second city to take this step. Of the eight largest cities in the United States only two—Baltimore and St. Louis—have failed to create a division

<sup>1</sup> In addition the inquiry included South Orange, N. J., with less than 10,000 population, on account of its relation to the general infant-welfare work of the Orange.

<sup>2</sup> See p. 7.

specializing in this work. Of the 42 cities in the 100,000 to 500,000 class, 12 have divisions or bureaus of child hygiene; of the 59 cities in the 50,000 to 100,000 class only 1 has such a division; of the 120 cities in the 25,000 to 50,000 class no city has such a division; and of the 372 cities in the 10,000 to 25,000 class only 1 has a division.

#### DIRECTORY OF INFANT-WELFARE AGENCIES.

The information secured from cities of 10,000 population and over is summarized in General Table 1, as a directory of municipal and private agencies, under the following headings: Infant-welfare stations; instruction by nurses not connected with infant-welfare stations who visit mothers in their own homes and give advice on the care of the baby, home modification of milk, etc.; prenatal work; Little Mothers' Leagues or classes for instructing young girls in infant hygiene; work by nurses for prevention of infant blindness; and city inspection of milk supply. A summary of this table, showing the distribution of certain phases of the work in different parts of the country, is presented in Table II.

TABLE II.—*Infant-welfare work carried on through stations and through nurses not connected with stations, and prenatal work, distributed according to divisions and States, 1915.*

Division and State.	Infant-welfare stations.										Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations.										Prenatal work.		
	Cities reporting.	Agencies reporting.	Stations.		Nurses.				Dispensing of milk—agencies.				Cities reporting.	Agencies reporting.	Nurses.				Cities reporting.	Agencies reporting.	Nurses.		
					Summer.	Winter.	Dispensing.				Summer.	Winter.											
							Full time.	Part time.	Total.	Whole milk only.					Modified milk only.	Both whole and modified milk.							
																	Full time.	Part time.					
United States.....	142	205	539	397	714	152	488	116	110	60	1	49	95	198	259	466	460	122	491	186	286	45	893
New England.....	29	34	76	51	97	23	57	9	23	7	.....	16	11	52	62	55	74	38	75	43	51	12	108
Maine.....	1	1	1	1	1	1	1	1	1	1	.....	1	1	1	1	1	1	1	1	1	2	1	2
New Hampshire.....	1	1	1	1	1	1	1	1	1	1	.....	1	1	1	1	1	1	1	1	1	2	1	2
Vermont.....	1	1	1	1	1	1	1	1	1	1	.....	1	1	1	1	1	1	1	1	1	2	1	2
Massachusetts.....	14	17	50	32	55	15	31	1	13	3	.....	10	4	31	42	38	48	34	45	25	31	10	64
Rhode Island.....	4	5	9	9	17	4	11	4	7	3	.....	4	5	3	3	5	5	5	6	6	7	1	15
Connecticut.....	8	8	11	7	14	3	6	4	7	3	.....	4	1	11	10	17	14	4	14	8	8	1	24
Middle Atlantic.....	53	93	252	174	323	57	203	55	42	25	1	16	51	53	86	234	155	19	171	52	114	18	347
New York.....	33	53	176	121	236	20	135	17	23	18	.....	5	30	27	48	218	125	8	142	23	54	14	243
New Jersey.....	13	15	21	18	15	23	15	10	8	1	.....	7	7	11	13	3	11	1	10	14	17	4	26
Pennsylvania.....	7	25	55	35	72	14	53	28	11	6	1	4	14	15	25	13	19	10	19	15	43	4	78
East North Central.....	27	36	117	90	181	36	144	29	19	11	.....	8	17	41	52	166	153	49	158	40	57	8	290
Ohio.....	10	13	48	37	85	24	66	21	8	5	.....	3	5	11	15	8	64	8	64	15	20	4	137
Indiana.....	6	7	16	9	12	9	7	4	5	3	.....	2	2	6	7	10	2	1	2	5	7	4	12
Illinois.....	5	8	31	30	47	2	38	7	3	1	.....	2	5	3	4	93	69	4	69	6	10	1	80
Michigan.....	5	7	15	15	22	1	18	1	2	2	.....	1	10	13	13	49	10	23	11	9	13	3	56
Wisconsin.....	1	1	7	4	15	.....	15	.....	1	.....	.....	1	1	11	13	6	8	33	12	5	7	7	5

TABLE II.—*Infant-welfare work carried on through stations and through nurses not connected with stations, and prenatal work, distributed according to divisions and States, 1915—Continued.*

Division and State.	Infant-welfare stations.										Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations.										Prenatal work.							
	Cities reporting.		Agencies reporting.		Stations.		Nurses.				Dispensing of milk—agencies.				Cities reporting.		Agencies reporting.		Nurses.				Cities reporting.		Agencies reporting.		Nurses.	
							Summer.		Winter.		Dispensing.																	
Full time.		Part time.		Full time.		Part time.		Full time.		Part time.		Full time.		Part time.		Full time.		Part time.		Full time.		Part time.						
Total.		Whole milk only.		Modified milk only.		Both whole and modified milk.		Not dispensing.																				
West North Central.....	12	19	37	30	32	18	23	7	12	7	.....	5	7	17	20	5	15	11	24	18	23	1	56					
Minnesota.....	3	4	9	7	12	2	11	2	3	2	.....	1	1	3	3	.....	3	3	3	3	3	.....	8					
Iowa.....	3	3	3	2	5	5	1	4	2	1	.....	3	3	6	8	5	6	9	5	6	6	1	16					
Missouri.....	4	10	22	21	13	3	11	1	7	4	.....	3	3	2	2	4	4	2	2	4	9	1	19					
North Dakota.....	1	1	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	2	2	.....	4	.....	4	2	2	.....	2					
South Dakota.....	1	1	1	.....	.....	8	.....	.....	.....	.....	.....	.....	1	1	2	1	1	2	9	1	2	.....	9					
Nebraska.....	1	1	2	.....	2	.....	1	1	1	.....	.....	.....	1	2	2	1	1	2	1	2	1	.....	2					
Kansas.....	6	7	25	25	26	14	25	11	6	3	.....	3	1	18	21	4	38	4	38	13	18	3	52					
South Atlantic.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....					
Delaware.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....					
Maryland.....	1	1	13	13	11	3	11	.....	1	.....	.....	1	1	2	3	1	2	1	2	2	4	2	15					
District of Columbia.....	1	2	7	7	7	5	7	5	2	1	.....	1	1	1	2	6	1	1	2	4	3	1	5					
Virginia.....	1	1	2	2	4	5	4	5	1	.....	.....	1	1	4	5	1	20	1	20	4	5	1	25					
West Virginia.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	1	1	1	1	1	1	.....	1					
North Carolina.....	1	1	1	1	1	1	1	1	1	1	.....	.....	.....	4	4	4	4	4	4	2	1	1	2					
South Carolina.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	3	3	2	2	2	2	1	1	.....	1					
Georgia.....	1	1	1	1	2	2	2	1	1	1	.....	.....	1	2	2	2	2	2	2	1	1	.....	2					
Florida.....	1	1	1	1	1	1	1	1	1	1	.....	.....	.....	1	1	.....	.....	.....	.....	.....	.....	.....	1					



	5	6	12	11	26	18	2	3	2	2	1	1	1	5	6	2	9
East South Central.....																	
Kentucky.....	2	2	6	6	9	8	1	1	1	1	1	1	1	2	3	1	1
Tennessee.....	3	3	6	6	16	10	1	2	1	1	1	1	1	2	3	1	7
Alabama.....														1	1	1	1
Mississippi.....																	
West South Central.....	4	5	4	4	11	11	3	2	5	5	1	5	1	4	5		13
Arkansas.....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		1
Louisiana.....	1	1			6	6	1	1	1	1	1	2	1	1	1		6
Oklahoma.....	2	3	3	3	4	1	1	2	2	2	1	2	1	2	3		6
Texas.....																	
Mountain.....	1	1	5	1	6		1	2	2	2		7		2	2		7
Montana.....																	
Idaho.....									1	1				1	1		
Wyoming.....																	
Colorado.....									1	1	7			1	1		7
New Mexico.....																	
Arizona.....																	
Utah.....	1	1	5	1	6		1										
Nevada.....																	
Pacific.....	5	5	11	11	13	3	2	1	3	8	9	12		9	10	1	11
Washington.....	1	1	1	1	1	1			1	4	5	5		2	2		2
Oregon.....																	
California.....	4	4	10	10	12	3	2	1	2	4	4	7		7	8	1	9

## INFANT-WELFARE STATIONS.

The establishments included under infant-welfare stations may be described under four headings: (1) Infant-welfare stations, which do not dispense milk but to which mothers may bring their babies for examination by doctors or nurses and which send nurses into the homes to instruct mothers in the care of the baby, home modification of milk, etc. (2) Milk stations, where a good quality of milk is dispensed, either free or at the prevailing price, for the use of mothers who are unable to nurse their babies. Other activities usually correspond with those of the infant-welfare station. (3) Feeding clinics, established by certain hospitals. It is to be noted that hospital clinics for sick babies are not included. (4) Health centers, which carry on educational work in a prescribed neighborhood and which deal with health and other problems affecting not only the baby but the entire family.

**Number of cities represented.**—The total number of cities represented in the reports received from agencies maintaining infant-welfare or milk stations is 142; the number of agencies, 205. Of the cities 53, with 93 agencies, are situated in the Middle Atlantic division, 33 of the cities and 53 of the agencies being in New York State. The New England division is represented by 29 cities and 34 agencies, with 14 cities and 17 agencies in Massachusetts, and the East North Central division by 27 cities and 36 agencies, with 10 cities and 13 agencies in Ohio.

**Number of stations.**—Reports were received from 205 agencies, maintaining 539 infant-welfare stations in 142 cities of 10,000 population and over. Of these stations only 397 were reported as operated in the winter. According to the inquiry the Middle Atlantic is far ahead of other divisions in the total number of stations maintained (252), and, as shown in Table V, in the number of stations reported by municipal agencies or by municipal in cooperation with private agencies (134) and by private agencies (118). Even if the stations maintained in New York City are eliminated, the statements still give the first place to the Middle Atlantic division.

**Milk dispensed.**—Replies received from the 205 agencies maintaining infant-welfare stations in 142 cities indicate that milk is dispensed by slightly more than one-half (110) of the agencies. Of these agencies 49 dispense both whole and modified milk, 60 whole milk only, and 1 modified milk only. In the stations of 95 agencies no milk is dispensed.

**Nurses attached to stations.**—Nurses who work with infant-welfare stations as headquarters, giving all or a portion of their time, number 866 in summer but only 604 in winter. Of the nurses employed in summer nearly one-half (404) are employed in stations

maintained by cities or by cities in cooperation with private agencies. The work is concentrated in the Middle Atlantic division with 380 nurses, of whom 256 are in New York State, including 165 in New York City.

**INSTRUCTION BY NURSES NOT CONNECTED WITH INFANT-WELFARE STATIONS.**

The figures in the preceding paragraph taken by themselves do not present a complete statement of infant-welfare nursing work. To obtain this it is necessary to add the nurses who are not connected with the work of a station but who visit mothers in their own homes and instruct them in the care of babies, in the modification of milk, etc. The figures shown in the tables for the number of nurses who give a portion of their time to such work are doubtless too small. At the present time a complete report would probably include workers in nearly every visiting-nurse association in the country. No attempt was made to carry on an exhaustive inquiry to bring out this information. The bureau addressed only those agencies which there was some reason to believe specialized in infant-welfare work.<sup>1</sup>

Agencies reporting nurses not connected with infant-welfare or milk stations doing educational work among mothers in their own homes were found in 198 cities. This number should not be added to the cities reporting stations in order to get the total number of cities having infant-welfare work, because many cities have both classes of work. The total number of cities reported as carrying on infant-welfare work, by municipal or private agency, either through stations or through nurses not connected with stations who visit mothers in their homes, is 287.

Of these nurses not connected with stations, 466 are reported as giving their entire time in summer to infant-welfare work, but only 122 as giving their entire time in winter. In addition, 460 visiting nurses, according to the table, do a certain amount of educational work in summer among mothers as a distinct branch of their routine, and 491 do similar work in winter. Thus altogether 926 infant-welfare nurses are employed in summer and 613 in winter. That the number of part-time nurses is greater in winter than in summer is accounted for by the fact that many nurses are attached to stations operated only during the summer. In winter their work may be described under the other heading, and this of course swells the total for the winter part-time nurses.

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<sup>1</sup> See p. 7.

## PRENATAL WORK.

The term "prenatal work" as used in this report refers to the care and instruction of prospective mothers in the hygiene of pregnancy by doctors and nurses attached to infant-welfare stations and obstetrical clinics and by nurses not attached to stations who visit mothers in their own homes. In collecting the information presented no attempt was made to address all hospitals and obstetrical clinics; the inquiry included only those institutions to which reference was made in the original sources of information.<sup>1</sup>

**Cities and agencies reporting.**—The number of cities reporting prenatal work as carried on by departments of health or by private agencies is 186. All sections of the country are represented. The Middle Atlantic division shows 52 cities reporting prenatal work, 23 of them being in New York State; the New England division reports 43, with 25 in Massachusetts; the East North Central division, 40; the West North Central, 18; and each of the other divisions less than 15.

Of the 286 agencies reporting this work, 114 are in the Middle Atlantic division, 57 in the East North Central, 51 in New England, 23 in the West North Central, and less than 20 in each of the other divisions.

**Nurses.**—According to the table, 45 nurses give their entire time to prenatal work, 13 being employed by boards of health.<sup>2</sup> Among the States, New York reports 14, Massachusetts 10. Although comparatively few nurses give their entire time to prenatal work, the fact that 893 give a portion of their time to this work is significant and indicates a growing disposition to include systematic prenatal work as a feature of the activities of the stations and of the agencies sending nurses into the homes.

**Obstetrical clinics.**—In some cases an obstetrical clinic employs nurses to do prenatal work; in others, agencies carrying on prenatal work establish clinics for the medical care of pregnant women; in others, again, such agencies work in cooperation with clinics. Of the 286 agencies reporting prenatal work by nurses, 59 report that they support obstetrical clinics.

**LITTLE MOTHERS' LEAGUES OR CLASSES FOR INSTRUCTING YOUNG GIRLS IN INFANT HYGIENE.**

Under this title are included classes in infant hygiene for girls of school age either as a feature of the school curriculum or as an activity carried on outside school hours by the health authorities or by some private agency. In response to this inquiry 44 cities of 10,000 population and over reported that classes for Little Mothers had been organized by municipal agencies. The information is presented in Table III.

<sup>1</sup> See p. 7.

<sup>2</sup> Table V, p. 37.

TABLE III.—*Little Mothers' Leagues or classes for instructing young girls in infant hygiene, conducted by municipal agencies in cities having a population in 1910 of 10,000 and over, 1915.*

[Sign (X) signifies that some work is being done in the field indicated.]

State and city.	Number of girls instructed annually.	Instruction given by—		Badges worn.	Classes.		
		Lectures.	Demonstrations.		In schools.		Elsewhere.
					During school hours.	Outside of school hours.	
California:							
Los Angeles.....	100	×	×		×		
Connecticut:							
Bridgeport <sup>1</sup> .....							
Hartford.....	500	×	×				Playgrounds.
District of Columbia:							
Washington.....	120	×	×				Model flats.
Illinois:							
Chicago.....	4,000	×	×	×	×		
La Salle, Peru, and Oglesby, Hygienic Institute, Department of Health.	180	×	×			×	
Indiana:							
Gary <sup>1</sup> .....							
Kansas:							
Topeka <sup>2</sup> .....							
Massachusetts:							
Holyoke <sup>3</sup> .....	( <sup>4</sup> )	×	×		×		
Northampton.....	100	×	×	×	×		
Springfield.....							
Michigan:							
Detroit.....	472	×	×	×		×	
Minnesota:							
Duluth.....	20	×	×			×	
Missouri:							
Kansas City.....	( <sup>4</sup> )	×	×			×	
New Jersey:							
Hackensack <sup>5</sup> .....	100	×	×			×	
Newark.....	35		×				
Orange.....							Weighing station and health department laboratory.
Pasadena.....	1,500	×	×	×	×	×	Playgrounds.
New York:							
Buffalo.....	( <sup>4</sup> )	×	×	×	×		
Dunkirk.....	200	×			×		
Jamestown <sup>1</sup> .....							
New York.....	17,638	×	×	×		×	Playgrounds, infant-welfare stations, and settlement houses.
Ogdensburg <sup>1</sup> .....							
Olean <sup>2</sup> .....							
Poughkeepsie.....	126	×	×	×			Child-welfare station.
Rochester.....	450	×	×	×	×	×	
Schenectady.....	50	×	×		×	×	
Utica <sup>1</sup> .....							
Yonkers <sup>3</sup> .....	997	×	×	×		×	
Ohio:							
Alliance <sup>1</sup> .....							
Cincinnati.....	1,110	×	×	×	×	×	
Cleveland <sup>2</sup> .....	2,500	×	×		×		
Elyria <sup>1</sup> .....							
Oklahoma:							
Enid <sup>1</sup> .....							

<sup>1</sup> Details not supplied.<sup>2</sup> Details not supplied; cooperates with Topeka Public Health Nursing Assn.<sup>3</sup> Details not supplied; cooperates with Holyoke Infant Hygiene Assn.<sup>4</sup> Number not supplied.<sup>5</sup> Details not supplied; cooperates with Children's Relief and General Welfare Society.<sup>6</sup> Approximately.<sup>7</sup> Details not supplied; cooperates with Olean Visiting Nurse Assn.<sup>8</sup> Cooperates with Milk Committee.<sup>9</sup> Cooperates with Babies' Dispensary and Hospital.

TABLE III.—*Little Mothers' Leagues or classes for instructing young girls in infant hygiene, conducted by municipal agencies in cities having a population in 1910 of 10,000 and over, 1915—Continued.*

(Sign (X) signifies that some work is being done in the field indicated.)

State and city.	Num-ber of girls in-struct-ed an-nually.	Instruction given by—		Badges worn.	Classes.		
		Lec-tures.	Demon-strations.		In schools.		Elsewhere.
					During school hours.	Out-side of school hours.	
Pennsylvania:							Milk stations.
Philadelphia.....	9,906	×	×	×	.....	×	
Pittsburgh.....	3,000	×	×	×	.....	.....	
Reading.....	93	×	×	.....	×	.....	
Rhode Island:							
Providence.....	36	×	×	.....	×	.....	
South Dakota:							
Aberdeen <sup>1</sup> .....	.....	.....	.....	.....	.....	.....	
Tennessee:							
Nashville <sup>1</sup> .....	.....	.....	.....	.....	.....	.....	
Utah:							
Salt Lake City <sup>1</sup> .....	.....	.....	.....	.....	.....	.....	
Virginia:							
Norfolk <sup>2</sup> .....	.....	.....	.....	.....	.....	.....	
Wisconsin:							
La Crosse <sup>3</sup> .....	.....	.....	.....	.....	.....	.....	
Milwaukee.....	5,242	×	×	.....	.....	×	

<sup>1</sup> Details not supplied.<sup>2</sup> Details not supplied; cooperates with King's Daughters Visiting Nurse Assn.<sup>3</sup> Details not supplied; cooperates with Associated Charities of La Crosse.

The number of young girls instructed annually is given as 48,475. Chicago reports 4,000 of these; New York, 17,638; Philadelphia, 9,906; Pittsburgh, 3,000; Milwaukee, 5,242. In 12 cities a distinctive badge is supplied, either free or for a small sum, to the girls in these classes or clubs.

In addition, the following private agencies reported some work under the heading of Little Mothers' Leagues or classes:

State and city.	Agency.
Alabama:	
Clanton.....	Chilton County Health Committee. <sup>1</sup>
California:	
Oakland.....	Baby Hospital of Alameda County.
Connecticut:	
Hartford.....	Visiting Nurse Association.
Litchfield.....	District Nursing Association. <sup>1</sup>
Middletown.....	{ District Nurse Association.
	{ Social Service League.
New Haven.....	Visiting Nurse Association.
District of Columbia:	
Washington.....	Washington Diet Kitchen Association.
Florida:	
Jacksonville.....	Infant Welfare Society.
Illinois:	
Chicago.....	Mary Crane Day Nursery.
Moline.....	King's Daughters, visiting nurse department.

<sup>1</sup> Affiliated with American Red Cross Town and Country Nursing Service.

State and city.	Agency.
<b>Indiana:</b>	
South Bend.....	Children's Free Dispensary and Hospital.
<b>Kansas:</b>	
Lawrence.....	Social Service League.
<b>Kentucky:</b>	
Paducah.....	Settlement House. <sup>1</sup>
<b>Louisiana:</b>	
New Orleans.....	Child Welfare Association.
<b>Maine:</b>	
Portland.....	Edward Mason Dispensary, milk station.
<b>Massachusetts:</b>	
Boston.....	Denison House, Boston College Settlement. Lincoln House. Milk and Baby Hygiene Association.
Fall River.....	District Nursing Association.
Gloucester.....	Gloucester District Nursing Association.
Leicester.....	Leicester Samaritan Association.
Lowell.....	Lowell Guild.
Lynn.....	Day Nursery Association (baby clinic).
North Adams.....	Visiting Nurse Aid Association.
Swampscott.....	Swampscott Visiting Nurse Association.
Waltham.....	Waltham District Nursing Association.
<b>Minnesota:</b>	
Duluth.....	Scottish Rite Masons, infant-welfare department.
St. Paul.....	St. Paul Baby Welfare Association.
<b>Missouri:</b>	
St. Joseph.....	Baby Welfare Association.
<b>Nebraska:</b>	
Lincoln.....	Charity Organization Society.
<b>New Jersey:</b>	
Camden.....	Visiting Nurse Society.
Jersey City.....	Child Welfare Association.
Long Branch.....	Long Branch Visiting Nurse Association.
Madison.....	Town Improvement Settlement House.
Morristown.....	Central Bureau of Social Service. Neighborhood House Association.
Orange.....	Diet Kitchen of the Oranges. Visiting Nurses' Association of Orange and West Orange.
South Orange.....	Society for Lending Comforts to the Sick.
<b>New York:</b>	
Albany.....	Central Christian Mothers Union.
Buffalo.....	District Nursing Association.
Cohoes.....	State Charities Aid Association, Cohoes Committee on Prevention of Tuberculosis.
Glens Falls.....	Child Welfare Committee.
Ithaca.....	Visiting Nurse Association. Ithaca Tuberculosis Committee.
New York.....	New York Association for Improving the Condition of the Poor. Sunnyside Day Nursery.
Purchase.....	Purchase Visiting Nurse Association. <sup>1</sup>
Syracuse.....	Infant Welfare Association.
Utica.....	Baby Welfare Committee of Utica.
Watertown.....	{ Bureau of Charities and Society for Prevention of Cruelty to Children. Visiting Nurse Association.

<sup>1</sup> Affiliated with American Red Cross Town and Country Nursing Service.

State and city.	Agency.
<b>Ohio:</b>	
Akron.....	George T. Perkins Visiting Nurse Association.
Cincinnati.....	Union Bethel Settlement.
Columbus.....	Instructive District Nursing Association.
<b>Pennsylvania:</b>	
Butler.....	Women's Industrial Club.
Easton.....	St. John's Lutheran Church.
Erie.....	Visiting Nurse Association.
Johnstown.....	Associated Charities of Greater Johnstown.
Lebanon.....	Visiting Nurse Association.
Meadville.....	Visiting Nurse Association.
Palmerton.....	New Jersey Zinc Co. (of Pennsylvania). <sup>1</sup>
Philadelphia.....	Baptist Settlement House.
	Child Federation.
	Children's Homeopathic Hospital.
	Cohocksink Mothers' Club.
	Mt. Sinai Hospital.
	Osteopathic Society.
Wilkes-Barre.....	Visiting Nurse Association.
<b>Texas:</b>	
Houston.....	Houston Settlement Association.
	Social Service Federation.
<b>Virginia:</b>	
Hot Springs.....	Hot Springs Valley Nursing Association. <sup>1</sup>
Leesburg.....	Lena Morton Memorial Nurse.
<b>Washington:</b>	
Mount Vernon.....	Skagit County public health nurse.
<b>Wisconsin:</b>	
Neenah and Menasha.....	Visiting Nurse Association of Neenah and Menasha.
Two Rivers.....	Ladies Charitable Association.

#### WORK FOR PREVENTION OF INFANT BLINDNESS.

The statements shown in General Table 1 concerning the prevention of infant blindness relate solely to work by nurses. Such work was reported by 181 cities as carried on by 251 agencies.

General Table 4, on page 106, is a Summary of State Laws and Rulings Relating to the Prevention of Blindness from Babies' Sore Eyes, founded on a statement published by the National Committee for the Prevention of Blindness and revised to include the laws of 1915.

#### MILK INSPECTION.

Inquiries covering country milk inspection, the scoring of dairies and stores selling milk, score cards employed, enforcement of bacteriological standards, and pasteurization ordinances were sent to all cities and towns having a population in 1910 of 10,000 and over. Of the 599 cities, 410 replied that milk inspection was carried on. Only 298 of these, however, supplemented this statement by returning the special schedule calling for detailed information. The tabulation of the information from these special schedules is presented in General Table 3, page 100.

<sup>1</sup> Affiliated with American Red Cross Town and Country Nursing Service.



Of the 298 cities represented, all except 58 reported country milk inspection. Dairies are scored in 228 cities and stores selling milk in 98. The card used by the Department of Agriculture, or a modification of that card, has been adopted in 146 cities; a bacteriological standard is enforced in 176 cities; a pasteurization ordinance is reported by only 43 cities.

#### HOSPITALS AND DISPENSARIES.

As explained elsewhere, this report deals with the infant-welfare and prenatal work of hospitals and dispensaries only so far as such work relates to the instruction of mothers and expectant mothers in infant hygiene and in the hygiene of pregnancy and to follow-up work by hospital nurses in keeping under observation babies who have left the hospital. No attempt was made to address all hospitals in the United States in order to bring out this information; the inquiry included, as in other cases, only those institutions to which reference was made in the original sources of information,<sup>1</sup> with a few institutions added in the course of correspondence.

#### COOPERATION BETWEEN AGENCIES.

It has been found impossible to present information in such a way as to show the minute points of cooperation between the different private agencies engaged in infant-welfare work and between such agencies and city health departments. In the larger cities and in many of the smaller ones the health departments cooperate freely with all organizations having work in any way touching on the problem of infant mortality. Obviously in a statistical statement an attempt to describe such cooperation would not be practicable. But where the information available has pointed to definite phases of cooperation, such phases, as far as possible, have been indicated.

#### CITIES IN DIFFERENT CLASSES.

Table IV shows the distribution of certain phases of infant-welfare work in cities of different population groups. It includes, in addition to the cities represented in other tables, a group of places having a population in 1910 of less than 10,000<sup>2</sup> and thus gives some idea of the growth of the work in smaller communities. The information concerning this last group has been gained more or less incidentally rather than by an exhaustive inquiry and does not by any means cover all infant-welfare work in the smaller places. It has a certain significance, however, as showing the tendency to include the instruction of mothers and prospective mothers in infant hygiene as a part of general nursing work.

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<sup>1</sup> See p. 7.

<sup>2</sup> For list of cities see General Table 2, p. 96.

TABLE IV.—*Infant-welfare work carried on through stations and through nurses, giving part or full time, not connected with stations, by municipal and private agencies, distributed according to population groups and divisions, 1915.*

Population group and division.	Infant-welfare stations.				Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations.				Prenatal work.		
	Stations operated by—		Nurses employed by—		Cities reporting.	Nurses employed by—		Cities reporting.	Nurses employed by—		Total.
	Cities reporting.	Municipal agency alone or co-operating with private agency.	Private agency.	Municipal agency alone or co-operating with private agency.	Private agency.	Municipal agency alone or co-operating with private agency.	Private agency.		Municipal agency alone or co-operating with private agency.	Private agency.	
United States.....	154	246	305	406	471	472	590	266	281	747	
Cities having a population of—											
500,000 and over.....	8	109	129	194	151	308	215	8	144	268	
100,000 to 500,000.....	33	84	78	141	141	72	91	36	70	138	
50,000 to 100,000.....	34	40	46	29	97	15	40	30	16	68	
25,000 to 50,000.....	27	18	19	20	32	46	33	36	17	53	
10,000 to 25,000.....	40	13	22	20	42	37	87	70	32	82	
Under 10,000.....	12	2	10	2	8	1	104	80	2	88	
New England.....	31	17	61	16	108	87	120	69	23	123	
500,000 and over.....	1	14	14	14	20	15	10	1	15	13	
100,000 to 500,000.....	7	10	22	9	30	17	17	6	.....	30	
50,000 to 100,000.....	9	5	15	2	38	5	16	9	1	19	
25,000 to 50,000.....	6	2	3	4	10	10	20	8	2	8	
10,000 to 25,000.....	5	.....	10	.....	27	8	31	19	5	27	
Under 10,000.....	2	.....	2	.....	35	.....	40	26	.....	26	
Middle Atlantic.....	61	136	124	221	164	226	192	72	139	256	
500,000 and over.....	3	90	68	147	83	200	92	3	91	117	
100,000 to 500,000.....	6	20	14	43	21	13	18	6	24	37	
50,000 to 100,000.....	12	5	18	6	30	5	10	12	4	27	
25,000 to 50,000.....	11	11	7	12	8	6	19	10	5	26	
10,000 to 25,000.....	21	8	11	11	19	12	22	21	14	21	
Under 10,000.....	8	2	6	2	3	.....	31	20	1	29	
East North Central.....	29	64	55	121	98	141	188	50	80	229	
500,000 and over.....	2	19	23	47	27	93	111	2	38	110	
100,000 to 500,000.....	8	38	17	64	41	30	36	7	30	71	
50,000 to 100,000.....	4	.....	5	1	12	.....	9	1	.....	7	
25,000 to 50,000.....	4	2	4	1	8	13	7	10	4	10	
10,000 to 25,000.....	9	5	4	9	8	5	16	20	8	20	
Under 10,000.....	2	.....	2	.....	23	.....	9	10	.....	11	

	12	10	27	8	42	20	12	27	21	10	50
West North Central											
500,000 and over.....	1	.....	11	.....	7	.....	.....	.....	1	.....	12
100,000 to 500,000.....	4	.....	10	1	20	1	.....	.....	.....	.....	12
50,000 to 100,000.....	3	3	3	5	7	2	.....	.....	.....	.....	6
25,000 to 50,000.....	3	2	2	2	7	6	1	.....	.....	.....	6
10,000 to 25,000.....	1	.....	1	.....	1	8	4	.....	.....	.....	6
Under 10,000.....	.....	.....	.....	.....	.....	3	1	2	.....	1	2
South Atlantic	.....	2	23	9	31	32	19	36	27	15	53
500,000 and over.....	1	.....	13	.....	14	1	.....	2	.....	.....	16
100,000 to 500,000.....	1	.....	7	.....	.....	3	.....	16	1	.....	16
50,000 to 100,000.....	3	2	2	9	4	1	2	.....	3	.....	3
25,000 to 50,000.....	.....	.....	.....	.....	.....	3	3	.....	.....	.....	.....
10,000 to 25,000.....	1	.....	1	.....	1	10	5	5	7	2	5
Under 10,000.....	.....	.....	.....	.....	.....	14	.....	13	14	.....	13
East South Central	5	5	7	15	10	8	.....	8	10	7	9
500,000 and over.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
100,000 to 500,000.....	3	5	5	15	8	1	.....	1	4	7	3
50,000 to 100,000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
25,000 to 50,000.....	2	.....	2	.....	2	1	.....	1	1	.....	1
10,000 to 25,000.....	.....	.....	.....	.....	.....	6	.....	6	5	.....	5
Under 10,000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
West South Central	4	1	3	1	11	5	3	3	4	1	12
500,000 and over.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
100,000 to 500,000.....	1	.....	.....	.....	6	.....	.....	.....	.....	.....	.....
50,000 to 100,000.....	2	.....	3	.....	5	2	1	2	.....	.....	6
25,000 to 50,000.....	1	1	.....	1	.....	1	1	1	.....	1	.....
10,000 to 25,000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Under 10,000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Mountain	1	5	.....	6	.....	3	.....	8	3	.....	8
500,000 and over.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
100,000 to 500,000.....	.....	.....	.....	.....	.....	1	.....	7	1	.....	7
50,000 to 100,000.....	1	5	.....	6	.....	.....	.....	.....	.....	.....	.....
25,000 to 50,000.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....
10,000 to 25,000.....	.....	.....	.....	.....	.....	.....	.....	1	1	.....	1
Under 10,000.....	.....	.....	.....	.....	.....	10	6	8	10	6	7
Pacific	5	6	5	9	7	.....	.....	.....	.....	.....	.....
500,000 and over.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
100,000 to 500,000.....	3	6	3	9	3	3	3	2	6	4	3
50,000 to 100,000.....	.....	.....	.....	.....	.....	1	1	.....	.....	.....	.....
25,000 to 50,000.....	1	1	1	1	3	.....	.....	.....	.....	.....	.....
10,000 to 25,000.....	1	.....	.....	.....	.....	4	2	4	2	2	1
Under 10,000.....	.....	.....	.....	.....	.....	2	.....	2	1	.....	1

1 Totals in this table do not check with those in Tables II and V, in which only cities of 10,000 population and over are included.

In spite of the spread of baby-saving activities in the past few years, 238 or 43 per cent of the 551 infant-welfare stations, together with 345 or 39 per cent of the 877 station nurses, and 523 or 49 per cent of the 1,062 nurses not connected with station work, are found to be concentrated in the eight cities of over 500,000, representing a total population of 11,511,841. Of the nurses who devote at least a portion of their time to prenatal work, 40 per cent are working in these eight large cities; but the figures show that agencies in other groups of cities as well are not neglecting this important phase of infant-welfare work.

### COMPARISON OF WORK BY MUNICIPAL AND PRIVATE AGENCIES.

The agency by which the work is carried on may be the municipality, either alone or in cooperation with a private agency, or an exclusively private agency. According to the reports, infant-welfare work is carried on by municipalities or private agencies through infant-welfare stations or through instruction of mothers in their homes by nurses in 287 cities of over 10,000 population. The number of cities in which some work of this character is done by the municipality or by the municipality in cooperation with some private agency is 149. Infant-welfare stations are operated by the municipalities in 60 cities; instruction of mothers in their homes is carried on by the municipal nurses in 100 cities; prenatal work is carried on by the municipal nurses in 63 cities. The total number of cities in which work is carried on by private agencies is 254.

It is found that for the country as a whole only in one group—cities having a population of between 100,000 and 500,000—does the number of stations maintained by cities or by cities in cooperation with private agencies exceed the number maintained by private agencies alone. The city stations, however, in two groups—the 500,000 and over and the 100,000 to 500,000—maintain as large a staff of nurses as the private agencies. Of the nurses not connected with station work who visit mothers in their homes, the number maintained by municipal or by municipal in cooperation with private agencies in the eight cities of 500,000 population and over is found to be much larger than that employed by private agencies. This is partly due to the employment of school nurses in summer in infant-welfare work.

With the exceptions noted, private agencies in all the different population groups outclass municipal agencies in the number of stations and in the number of nurses in station work and of those not connected with stations. The same thing is true in nearly all sections of the country and in nearly all population groups, with the exception of some of the groups in the Middle Atlantic division, the East North Central, and one group in the Pacific division.

A comparison in detail of infant-welfare work by municipal and by private agencies, and by municipal cooperating with private agencies, in cities of 10,000 population and over is shown in Table V.

TABLE V.—*Infant-welfare work carried on through stations and through nurses not connected with stations, and prenatal work, distributed according to character of agencies and divisions, 1915.*

Character of agency and division.	Infant-welfare stations.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work—Number of nurses.	
	Number.		Nurses.				Summer.		Winter.		Full time.	Part time.
	Sum-mer.	Win-ter.	Summer.		Winter.		Full time.	Part time.	Full time.	Part time.		
			Full time.	Part time.	Full time.	Part time.						
United States.....	539	397	714	152	488	116	466	460	122	491	45	893
Municipal.....	181	117	283	20	140	27	371	56	39	63	13	179
Private.....	295	235	342	120	277	79	74	391	70	408	31	628
Cooperating.....	63	45	89	12	71	10	21	13	13	20	1	86
New England.....	76	51	97	23	57	9	55	74	38	75	12	108
Municipal.....	6	.....	8	3	2	.....	35	10	22	6	.....	17
Private.....	59	43	84	20	53	9	17	59	13	63	11	86
Cooperating.....	11	8	5	.....	2	.....	3	5	3	6	1	5
Middle Atlantic.....	252	174	323	57	203	55	234	155	19	171	18	347
Municipal.....	124	84	190	14	95	24	216	13	2	23	11	124
Private.....	118	84	121	40	102	30	18	141	15	143	7	220
Cooperating.....	10	6	12	3	6	1	.....	1	2	5	.....	3
East North Central.....	117	90	181	36	144	29	166	153	49	158	8	290
Municipal.....	27	15	51	1	28	.....	117	7	11	8	2	16
Private.....	53	47	65	31	58	25	34	144	35	145	6	212
Cooperating.....	37	28	65	4	58	4	15	2	3	5	.....	62
West North Central.....	37	30	32	18	23	7	5	15	11	24	1	56
Municipal.....	8	6	4	2	3	2	.....	5	.....	5	.....	4
Private.....	27	24	26	16	20	5	2	9	6	19	1	47
Cooperating.....	2	.....	2	.....	.....	.....	3	1	5	.....	.....	5
South Atlantic.....	25	25	26	14	25	11	4	38	4	38	3	52
Municipal.....	.....	.....	.....	.....	.....	.....	2	14	3	14	.....	6
Private.....	23	23	22	9	21	6	2	21	1	21	3	37
Cooperating.....	2	2	4	5	4	5	.....	3	.....	3	.....	9
East South Central.....	12	11	25	.....	18	.....	1	1	.....	1	2	9
Municipal.....	5	5	15	.....	9	.....	.....	.....	.....	.....	.....	7
Private.....	7	6	10	.....	9	.....	1	1	.....	1	2	2
Cooperating.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
West South Central.....	4	4	11	1	11	1	1	5	1	5	.....	13
Municipal.....	.....	.....	.....	.....	.....	.....	1	2	1	2	.....	.....
Private.....	3	3	10	1	10	1	.....	3	.....	3	.....	12
Cooperating.....	1	1	1	.....	.....	.....	.....	.....	.....	.....	.....	1
Mountain.....	5	1	6	.....	.....	1	.....	7	.....	7	.....	7
Municipal.....	5	1	6	.....	.....	1	.....	.....	.....	.....	.....	.....
Private.....	.....	.....	.....	.....	.....	.....	.....	7	.....	7	.....	7
Cooperating.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Pacific.....	11	11	13	3	7	3	.....	12	.....	12	1	11
Municipal.....	6	6	9	.....	3	.....	.....	5	.....	5	.....	5
Private.....	5	5	4	3	4	3	.....	6	.....	6	1	5
Cooperating.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....	1



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## GENERAL TABLES.

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**EXPLANATORY NOTE.**—Absence of entry in any of the columns indicates that a positive statement has been received that at the time of the inquiry no infant-welfare work was being carried on.

Reference to a footnote "No information supplied," indicates that no response has been received to the Children's Bureau inquiries.

Reference to a footnote "Work reported. Detailed information not available," indicates that the agency stated upon the preliminary schedule that some work was carried on but did not fill out the supplemental schedules asking for detailed information.

TABLE 1.—*Infant-welfare work by municipal and private agencies in*

[Sign (X) signifies that some work is

State and city.	Agency.	Infant-welfare stations.							
		Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
		Summer.	Winter.			Summer.		Winter.	
						Full time.	Part time.	Full time.	Part time.
ALABAMA.									
1	Anniston.....	Municipal.....							
2	Bessemer.....	do. <sup>1</sup> .....							
3	Birmingham.....	do.....							
4		Infant Welfare Assn., 1622 S. Thirteenth St.							
5	Gadsden.....	Municipal.....							
6	Mobile.....	do.....							
7	Montgomery.....	do.....							
8	Selma.....	do. <sup>1</sup> .....							
ARIZONA.									
9	Phoenix.....	Municipal.....							
10	Tucson.....	do.....							
ARKANSAS.									
11	Argenta.....	Municipal.....							
12	Fort Smith.....	do. <sup>1</sup> .....							
13	Hot Springs.....	do. <sup>1</sup> .....							
14	Little Rock.....	do.....							
15		United Charities Assn., City Hall.....	1	1	286	5	1		1
16		Metropolitan Life Insurance Co., State Bank Building.							
17	Pine Bluff.....	Municipal.....							
18	Texarkana <sup>2</sup> .....	do.....							
CALIFORNIA.									
19	Alameda.....	Municipal.....							
20	Bakersfield.....	do.....							
21	Berkeley.....	do.....							
22		Berkeley Dispensary, <sup>3</sup> 954 University St.	1	1		1	1		1
23	Eureka.....	Municipal.....							
24	Fresno.....	do.....							
25	Long Beach.....	do.....							
26	Los Angeles.....	Municipal (division of child welfare).....	6	6	400	6	9		3
27	Oakland.....	Municipal.....							
28		Baby Hospital of Alameda County, 5105 Dover St.	2	2	450	20	2		2
29	Pasadena.....	Municipal.....							
30	Pomona.....	do.....							
31	Redlands.....	do.....							
32		Associated Charities, room 5, City Hall.							
33	Riverside.....	Municipal.....							
34	Sacramento.....	do.....							
35	San Bernardino.....	do.....							
36	San Diego.....	do. <sup>1</sup> .....							
37	San Francisco.....	do.....							
38		University of California Hospital Dispensary, Second and Parnassus Aves.							
39		Certified Milk and Baby Hygiene Committee (Assn. of Collegiate Alumnae). <sup>4</sup>							

<sup>1</sup> No information supplied.<sup>2</sup> Under 10,000 population. Joint population of Texarkana, Ark., and Texarkana, Tex., 15,445.<sup>3</sup> Overhead expenses included in city tax budget. City health department and Certified Milk and Baby Hygiene Committee, Association of Collegiate Alumnae, cooperate.



*cities and towns having a population in 1910 of 10,000 and over, 1915.*

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.						
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.	Supporting an obstetrical clinic.				
							1				1					1
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															×	4
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							1		1					×	×	14
																15
																16
															×	17
																18
																19
×	×			×							1	×			×	20
																21
																22
×	×			×	×	1		1			1	×		×	×	23
×	×	×	×			2		2			2	( <sup>6</sup> )	×	×	×	24
														×	×	25
														×	×	26
														×	×	27
														×	×	28
							1	1			1			×		29
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														×	×	35
										( <sup>7</sup> )	( <sup>7</sup> )	×		×		36
																37
																38
																39

<sup>4</sup> For period of approximately 6 months.

<sup>5</sup> City furnishes supplies for clinic of Dispensary of University of Southern California.

<sup>6</sup> Limited.

<sup>7</sup> All nurses in training school have 6 weeks prenatal nursing.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.							
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Sum-mer.		Win-ter.	
							Full time.	Part time.	Full time.	Part time.
	CALIFORNIA—contd.									
1	San Jose.....	Municipal.....								
2	Santa Barbara.....	do.....								
3		Visiting Nurse Assn., 133 E. Haley St.	11	11	102	(*)		3		3
4	Santa Cruz.....	Municipal.....								
5	Stockton.....	do.....								
6	Vallejo.....	do.....								
	COLORADO.									
7	Colorado Springs...	Municipal.....								
8	Denver.....	do.....								
9		Visiting Nurse Assn., 536 Temple Court Building.								
10	Pueblo.....	Municipal.....								
11	Trinidad.....	do.....								
	CONNECTICUT.									
12	Ansonia.....	Municipal.....								
13		Nurse Assn., Ansonia, Derby, and Shelton.								
14	Bridgeport.....	Municipal.....								
15		Bridgeport Visiting Nurse Assn., 475 State St.	1	1	175	2	1		1	
16	Bristol.....	Municipal.....								
17		Bristol Visiting Nurse Assn., <sup>3</sup> 343 N. Main St.								
18	Danbury.....	Municipal <sup>2</sup> .....								
19	Greenwich.....	do.....								
20	Hartford.....	do.....								
21		Babies Hospital, <sup>2</sup> 243 Market St.								
22		Visiting Nurse Assn., 34 Charter Oak Ave.								
23	Manchester.....	Municipal.....								
24		Cheney Brothers, South Manchester	1	1	<sup>4</sup> 18			2		2
25	Meriden town.....	Municipal.....								
26		Young Women's Christian Association, 32 Crown St.	1			(1)	1	1		
27	Middletown.....	Municipal.....								
28		District Nurse Assn., 181 High St.	1	1	94		1			1
29		Social Service League, 165 Broad St.								
30	Naugatuck.....	Municipal <sup>2</sup> .....								
31	New Britain.....	do.....								
32		Milk Supply Station.....	1		104	6	2			
33		Visiting Nurse Assn., 65 S. High St.								
34	New Haven.....	Municipal.....								
35		Infant Welfare Assn., 200 Orange St.	4	2	165	4	4			<sup>5</sup> 1
36		Visiting Nurse Assn., 200 Orange St.								
37	New London.....	Municipal.....								
38		Associated Charities.....								
39	Norwalk.....	Municipal.....								

<sup>1</sup> Baby conference once a week; general dispensary 2 afternoons a week.<sup>2</sup> No information supplied.<sup>3</sup> Work reported. Detailed information not available.<sup>4</sup> To certain extent by school nurse.<sup>5</sup> For period of 2 months.<sup>6</sup> Between mothers and nurses; family physicians consulted when necessary.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.					Supporting an obstetrical clinic.
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				
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															14
X	X			X	X	6					1	X		X	15
															16
															17
						( <sup>9</sup> ) <sub>1</sub>	( <sup>9</sup> ) <sub>1</sub>	( <sup>9</sup> ) <sub>1</sub>	( <sup>9</sup> ) <sub>1</sub>					X	18
														X	19
														X	20
							7		7			X		X	21
															22
( <sup>9</sup> ) <sub>1</sub>	X						( <sup>9</sup> ) <sub>1</sub>		( <sup>9</sup> ) <sub>1</sub>		2			X	23
	X		X	X											24
															25
															26
( <sup>9</sup> ) <sub>1</sub>	X		X	X							4	X			27
															28
															29
															30
	X		X	X	X	3		3						X	31
						7									32
X	X		X	X	X	7									33
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															99
															100

<sup>1</sup> General cooperation by physicians.

<sup>2</sup> School nurses.

<sup>3</sup> Help from Visiting Nurse Assn. in care of sick babies.

<sup>4</sup> Available for students of Yale Medical School.

<sup>5</sup> Financed by Civic Federation.

<sup>6</sup> Milk dispensed, but no regular station maintained.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations <sup>1</sup>								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Fulltime.	Parttime.	Fulltime.	Parttime.	
	CONNECTICUT—CON.										
1	Norwich.....	Municipal <sup>1</sup>									
2	Orange.....	do.									
3	Stamford.....	do.									
4	Torrington.....	Visiting Nurse Assn., Richmond House	1	1	100	1	3		3		
5	Wallingford.....	Municipal <sup>2</sup>									
6	Waterbury.....	do.									
7	Waterbury.....	Waterbury Visiting Nurse Assn., 37 Central Ave.	1	1	597		2		2		
8	Willimantic.....	Municipal.									
9	Willimantic.....	Municipal.									
	DELAWARE.										
10	Wilmington.....	Municipal.									
11	Wilmington.....	West End Reading Co. Milk Depot <sup>3</sup>									
	DIST. OF COLUMBIA.										
12	Washington.....	Municipal <sup>4</sup>									
13	Washington.....	Friendship House, 324 Virginia Ave. S.E.	1	1	( <sup>5</sup> )	1	( <sup>6</sup> )		( <sup>6</sup> )		
14	Washington.....	Instructive Visiting Nurse Society, 2506 K St.	<sup>6</sup> 1	1				5		5	
15	Washington.....	Noel House, 1663 Kramer Pl. N.E.									
16	Washington.....	Washington Diet Kitchen Assn., 1322 Twenty-eighth St.	5	5	813	20	7		7		
17	Washington.....	Woman's Clinic Auxiliary, 716 Thirteenth St.									
	FLORIDA.										
18	Jacksonville.....	Municipal.									
19	Jacksonville.....	Infant Welfare Society, <sup>10</sup> Engineer Bldg.	1	1	365	1	2		1		
20	Key West.....	Municipal.									
21	Pensacola.....	do.									
22	Tampa.....	do.									
	GEORGIA.										
23	Athens.....	Municipal <sup>2</sup>									
24	Atlanta.....	do.									
25	Augusta.....	do.									
26	Brunswick.....	do.									
27	Columbus.....	do.									
28	Macon.....	do. <sup>3</sup>									
29	Rome.....	do.									
30	Savannah.....	do.									
31	Savannah.....	Mary MacLean Circle of King's Daughters, 343 Drayton St.	1	1	( <sup>5</sup> )	( <sup>11</sup> )	2		2		
32	Waycross.....	Municipal.									
	IDAHO.										
33	Boise.....	Municipal <sup>1</sup>									

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> No information supplied.<sup>3</sup> Limited.<sup>4</sup> Supplies literature for distribution by infant-welfare agencies.<sup>5</sup> Nurse supplied by Instructive Visiting Nurse Society.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
	X					(1)	(2)	(1)	(3)		3				X	X
	X	X									2					X
	X	X			X								X			X
	X						5		5		5	X			X	
	X	X	X		X		1		1							

\* Diet kitchen cooperates in maintaining station.

† Part time given to follow-up work of Washington Diet Kitchen Assn. stations.

‡ Instruction by physicians on staff.

§ 1 school nurse who cooperates with Infant Welfare Society; 1 nurse for work among colored population.

|| Specific cooperation by board of health.

|| General cooperation by physicians.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.							
			Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Summer.		Winter.	
							Fulltime.	Parttime.	Fulltime.	Parttime.
1	ILLINOIS.									
2	Alton.....	Municipal.....								
3	Aurora.....	do.....								
4	Belleville.....	do.....								
5	Bloomington.....	do. <sup>1</sup> .....								
6	Cairo.....	do.....								
7	Canton.....	do.....								
8	Champaign.....	do. <sup>1</sup> .....								
9	Chicago.....	Municipal (division of child hygiene) <sup>2</sup> .....	3	3	1,089	3	9		3	
10		Infant Welfare Society of Chicago, <sup>3</sup> 104 S. Michigan Ave.	21	21	5,492	23	24		24	
11		Jewish Aid Society, West Side Dispensary, 1012 Maxwell St.	1	1	928	4	2		2	
12		Lying-in Hospital and Dispensary, 1336 Newberry Ave.								
13		Mary Crane Day Nursery, <sup>4</sup> 818 Gilpin Place.								
14		Olivet Dispensary, 1500 Hudson St....	1	1	285	2	1		1	
15		Visiting Nurse Assn. of Chicago, <sup>5</sup> 104 S. Michigan Ave.								
16	Chicago Heights.....	Municipal.....								
17	Cicero.....	do.....								
18	Danville.....	do.....								
19	Decatur.....	do.....								
20	East St. Louis.....	Woman's Club <sup>1</sup> .....								
21	Elgin.....	Municipal.....								
22	Evanston.....	do.....								
23	Freeport.....	Visiting Nurse Assn., 732 Emerson St.								
24	Galesburg.....	Municipal.....								
25		do.....								
26		Galesburg Visiting Nurse Assn., City Hall.	(*)		19	(10)	1			
27	Jacksonville.....	Municipal.....								
28	Joliet.....	do.....								
29	Kankakee.....	do.....								
30	La Salle (associated with Peru and Oglesby).	Hygienic Institute, Department of Health for La Salle, Peru, and Oglesby. <sup>1</sup>	2	2	140	(12)	2		1	
31	Lincoln.....	Municipal.....								
32	Mattoon.....	do.....								
33	Moline.....	do.....								
34		King's Daughters, visiting nurse department, 1539½ Third Ave.	1	1	165	1	3	1	3	1
35	Oak Park.....	Municipal <sup>1</sup> .....								
36	Peoria.....	do.....								
37		Visiting Nurse Committee, Associated Charities, <sup>1</sup> 301 City Hall.								
38		Child's Welfare League <sup>1</sup> .....								
39		Pure milk dispensary <sup>1</sup> .....								
40	Quincy.....	Municipal.....								

<sup>1</sup> No information supplied.<sup>2</sup> Health department, Visiting Nurse Assn. of Chicago, and other agencies cooperate with Infant Welfare Society of Chicago, under which all infant-welfare work is centralized.<sup>3</sup> School nurses employed in summer. Cooperate with Infant Welfare Society of Chicago.<sup>4</sup> 3 additional physicians in summer.<sup>5</sup> Furnishes headquarters for 1 station, maintained by Infant Welfare Society of Chicago.<sup>6</sup> Staff of day nursery available for this work.

TABULAR STATEMENT OF INFANT-WELFARE WORK.

47

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.						
	×	×															1
		×															2
	×	×															3
																	4
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			×														6
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	×	×		×	×						(5)		×				12
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		×											×				28
														×			29
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×	×		×	×	×						3		×				32
																	33
																	34
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																	40

<sup>1</sup> Limited.

<sup>2</sup> Work reported. Detailed information not available.

<sup>3</sup> A course of baby conferences held in summer of 1914.

<sup>4</sup> General cooperation by physicians.

<sup>5</sup> Largely supported by private gifts.

<sup>6</sup> Health department physicians.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Summer.		Winter.		
							Fulltime.	Parttime.	Fulltime.	Parttime.	
ILLINOIS—continued.											
1	Rockford.....	Municipal.....									
2		Visiting nurse department, Public Welfare Assn., 116 S. Wyman St.	1		35	1	3		2	1	
3	Rock Island.....	Municipal.....									
4		Visiting Nurse Assn., West End Settlement House.	1	1	56	1	2	1	2	1	
5	Springfield.....	Municipal.....									
6	Streator.....	do. <sup>1</sup> .....									
7	Waukegan.....	do.....									
INDIANA.											
8	Anderson.....	Municipal.....									
9	East Chicago.....	do.....	1		(?)		1				
10		Welfare Association.....									
11	Elkhart.....	Municipal.....									
12	Elwood.....	do.....									
13	Evansville.....	do.....									
14		Babies' Milk Fund Assn. of Evansville.	1	1	532	7	2		2		
15	Fort Wayne.....	Municipal.....									
16		First Presbyterian Church.....	1		85	12	1	4			
17	Gary.....	Municipal.....									
18	Hammond.....	do.....	1	1		2	2	1	2		
19	Huntington.....	do. <sup>1</sup> .....									
20		Local Council of Women, <sup>1</sup> 335 W. Matilda St.									
21	Indianapolis.....	Municipal.....	8	4	1,352	5	5	2	2	2	
22		Children's Aid Assn., City Hall.....									
23		Bethany Social Center and Flanner House.	2	2		2		2		2	
24	Jeffersonville.....	Municipal <sup>1</sup> .....									
25	Kokomo.....	do.....									
26	Lafayette.....	do. <sup>1</sup> .....									
27		Flower Mission <sup>2</sup> .....									
28	Laporte.....	Municipal.....									
29	Logansport.....	do.....									
30		Red Cross Assn. of Cass County, Masonic Temple.									
31	Marion.....	Municipal.....									
32	Michigan City.....	do.....									
33	Mishawaka.....	do.....									
34	Muncie.....	do.....									
35	New Albany.....	do.....									
36	Peru.....	do. <sup>2</sup> .....									
37	Richmond.....	do.....									
38		Visiting Nurse Assn., Commercial Club rooms.									
39	South Bend.....	Municipal.....									
40		Children's Free Dispensary and Hospital, 1031 W. Division St.	2	1	129	6	1		1		
41		Visiting Nurse Assn. of South Bend, <sup>3</sup> 219 Jefferson Bldg.									
42	Terre Haute.....	Municipal.....									
43		Terre Haute Social Settlement, <sup>2</sup> 29 N. First St.									
44	Vincennes.....	Municipal.....									

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> No information supplied.<sup>3</sup> Under 5 years of age.<sup>4</sup> Delivered by milk committee to home, upon orders.



and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				
×	×		×								2		×	1	1
×	×			×							2			1	2
														×	3
														×	4
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	×			(2)	(2)			1			1		×	×	9
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×	×			×									×	1	11
×	×		×	×	×								×	×	12
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×	×	×	×	×							2		×	×	16
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×	×	×	×	×									×	×	18
													×	×	19
														×	20
×	×	×	×	×		10				6			×	×	21
										2					22
						(1)	(1)	(1)	(1)						23
														×	24
														×	25
														×	26
														×	27
														×	28
							1		1					×	29
														×	30
														×	31
														×	32
														×	33
														×	34
														×	35
														×	36
														×	37
							1		1		1		×	×	38
×	×		×	×	×									×	39
														×	40
														×	41
														×	42
														×	43

\* School nurses.

† Limited.

‡ Services of two untrained workers.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

			Infant-welfare stations.							
State and city.		Agency.	Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Sum-mer.		Winter.	
							Full time.	Part time.	Full time.	Part time.
IOWA.										
1	Boone	Municipal.								
2	Burlington	do.								
3		Child Welfare Committee of the Red Cross.	1	1	(*)	9	1		1	
4		Visiting Nurses Assn. of Burlington, 416 Columbia St.								
5	Cedar Rapids	Municipal.								
6	Clinton	do.								
7	Council Bluffs	do. <sup>1</sup>								
8	Davenport	do.								
9		Davenport Visiting Nurse Assn., 1216 W. Third St.	1	1	98	1		4		4
10	Des Moines	Municipal.								
11		Des Moines Visiting Nurse Assn., 418 Century Bldg.	1		85	2	4	1		
12	Dubuque	Municipal.								
13		Dubuque Visiting Nurse Assn.								
14	Fort Dodge	Municipal.								
15	Iowa City	do.								
16	Keokuk	do. <sup>2</sup>								
17		Visiting Nurse Assn., 425 Blondeau St.								
18	Marshalltown	Municipal <sup>3</sup>								
19	Mason City	do.								
20		Cerro Gordo County visiting nurse, 215 N. Madison Ave.								
21	Muscatine	Municipal.								
22	Ottumwa	do.								
23	Sioux City	do.								
24		Child Welfare Assn. <sup>4</sup>								
25		Visiting Nurse Assn.								
26	Waterloo	Municipal.								
27		Associated Charities and Corrections, City Hall.								
KANSAS.										
28	Atchison	Municipal.								
29	Coffeyville	do.								
30	Fort Scott	do.								
31	Hutchinson	do.								
32	Independence	do.								
33	Kansas City	do.								
34	Lawrence	do.								
35		Social Service League.								
36	Leavenworth	Municipal.								
37	Parsons	do.								
38	Pittsburg	do.								
39	Topeka	do.								
40		Topeka Public Health Nursing Assn., City Bldg.	2		20		2			
41	Wichita	Municipal.								

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> Work discontinued November, 1914. To be resumed under newly organized Social Service League.<sup>3</sup> No information supplied.<sup>4</sup> 61 physicians cooperated during the year.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.	Supporting an obstetrical clinic.			
												</			

<sup>a</sup> Under supervision of Des Moines Visiting Nurse Assn.

<sup>b</sup> Situated in "model cottage" of Roadside Settlement.

<sup>c</sup> School nurse.

<sup>d</sup> With State assistance in salary of inspector.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.							
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Sum-mer.		Winter.	
							Fulltime.	Parttime.	Fulltime.	Parttime.
KENTUCKY.										
1	Covington.....	Municipal.....								
2	Frankfort.....	do. <sup>1</sup> .....								
3	Henderson.....	do.....								
4	Lexington.....	do.....								
5		Fayette Tuberculosis Assn. and Visiting Nurses' Assn., 614 W. Main St.	1		22	2	1			
6	Louisville.....	Municipal.....								
7		Babies' Milk Fund Assn. of Louisville, 215 E. Walnut St.	5	5	628	7	8		8	
8	Newport.....	Municipal.....								
9	Owensboro.....	do. <sup>1</sup> .....								
10	Paducah.....	do.....								
11		Settlement House, <sup>4</sup> 1405 S. Third St.								
LOUISIANA.										
12	Alexandria.....	Municipal.....								
13	Baton Rouge.....	do.....								
14	Lake Charles.....	do.....								
15	Monroe.....	do.....								
16	New Orleans.....	do. <sup>5</sup> .....								
17		Child Welfare Assn., <sup>4</sup> 419 Gravier St.	( <sup>6</sup> )	( <sup>6</sup> )	716	4	6		6	
18	Shreveport.....	Municipal.....								
MAINE.										
19	Auburn.....	Municipal.....								
20	Augusta.....	do.....								
21	Bangor.....	do.....								
22	Biddeford.....	do.....								
23		Trull Hospital Aid Assn. <sup>3</sup> .....								
24	Lewiston.....	Municipal.....								
25	Portland.....	do. <sup>7</sup> .....								
26		District Nursing Assn. of Portland								
27		Edward Mason Dispensary, milk station, <sup>7</sup> 65 India St.	1	1	297	2	1		1	
28	Waterville.....	Municipal.....								
MARYLAND.										
29	Baltimore.....	Municipal.....								
30		Instructive Visiting Nurse Assn. of Baltimore, 1123 Madison Ave.								
31		Mothers' Relief Society, 1123 Madison Ave.								
32		Johns Hopkins Hospital.....								
33		Maryland Assn. for Study and Prevention of Infant Mortality (Babies' Milk Fund Assn.), 10 E. Fayette St.	13	13	4,803	8	11	3	11	
34		Thomas Wilson Sanitarium.....								
35	Cumberland.....	Municipal.....								
36	Frederick.....	do.....								
37		Frederick County Branch of the Maryland Assn. for the Prevention and Relief of Tuberculosis, 133 S. Market St.								
38	Hagerstown.....	Municipal.....								

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> No information supplied.<sup>3</sup> Clinic supported by medical department of the University of Louisville.<sup>4</sup> Affiliated with American Red Cross Town and Country Nursing Service.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.  
being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					

\* Appropriation made by city toward support of Child Welfare Association.

• Number not supplied.

† City furnishes salary of nurse for Edward Mason Dispensary, milk station.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Fulltime.	Parttime.	Fulltime.	Parttime.	
MASSACHUSETTS.											
1	Adams.....	Municipal <sup>1</sup> .....									
2	Arlington.....	do.....									
3	Attleboro.....	do.....									
4		Attleboro Anti-Tuberculosis Society, 124 Pleasant St.									
5	Beverly.....	Municipal.....									
6		Beverly Hospital, <sup>2</sup> Herrick St.									
7	Boston.....	Municipal (division of child hygiene).									
8		Boston Lying-in Hospital, 24 McLean St.									
9		Children's Hospital, <sup>1</sup> Huntington Ave.									
10		Denison House, Boston College Settlement, <sup>3</sup> 93 Tyler St.	( <sup>4</sup> )	( <sup>4</sup> )							
11		Cottage Place Day Nursery, <sup>5</sup> 1049 Columbus Ave., Roxbury.	( <sup>4</sup> )	( <sup>4</sup> )							
12		Dorchester House, <sup>6</sup> 7 Gordon Place....	( <sup>4</sup> )	( <sup>4</sup> )							
13		Elizabeth Peabody House, <sup>6</sup> 357 Charles St.	( <sup>4</sup> )	( <sup>4</sup> )							
14		Infants' Hospital, social service department, 55 Van Dyke St.									
15		Instructive District Nursing Assn., <sup>6</sup> 561 Massachusetts Ave.									
16		Lincoln House, <sup>6</sup> 80 Emerald St.....	( <sup>4</sup> )	( <sup>4</sup> )							
17		Massachusetts General Hospital, social service department, Blossom St.	1	1	143	3	1	1	1		
18		Massachusetts Homeopathic Hospital, 82 E. Concord St.	1	1	134	1	1		1		
19		Maverick Dispensary, 18 Chelsea St., East Boston.									
20		Milk and Baby Hygiene Assn., 26 Bennet St.	12	12	4,097	13	17		14		
21		Milk Fund, 55 Van Dyke St.....									
22		Neighborhood House, <sup>6</sup> 62 Hale St.....	( <sup>4</sup> )	( <sup>4</sup> )							
23		North End Union, <sup>6</sup> 20 Parmenter St....	( <sup>4</sup> )	( <sup>4</sup> )							
24		Peter Brent Brigham Hospital, 26 Charter St.									
25		Roxbury Neighborhood House, <sup>3</sup> 858 Albany St.	( <sup>4</sup> )	( <sup>4</sup> )							
26		South Bay Union, <sup>6</sup> 640 Harrison Ave..	( <sup>4</sup> )	( <sup>4</sup> )							
27		South End House, <sup>11</sup> 43 East Canton St.									
28		Woman's Municipal League, 209 Beacon St.									
29	Brockton.....	Municipal <sup>12</sup> .....	2		200	4	1				
30		Brockton Visiting Nurse Assn.....									
31	Brookline.....	Municipal.....									
32		Brookline Friendly Society, Union Building.									
33	Cambridge.....	Municipal.....	5		135			3			
34		Neighborhood House, Moore St.....	1	1	66	1		1		1	
35		Cambridge Visiting Nursing Assn., 35 Bigelow St.									

<sup>1</sup> No information supplied.<sup>2</sup> Nurses employed when necessary.<sup>3</sup> Work reported. Detailed information not available.<sup>4</sup> Out-patient nursing work done by Instructive District Nursing Assn.<sup>5</sup> Give quarters for infant-welfare station maintained by Milk and Baby Hygiene Assn.<sup>6</sup> Supply nurses for pregnancy clinic of Boston Lying-in Hospital.<sup>7</sup> Feeding clinic.<sup>8</sup> Number visited by social service worker.<sup>9</sup> In cooperation with Woman's Municipal League. Nurses supplied by Instructive District Nursing Assn.



TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

			Infant-welfare stations.								
State and city.		Agency.	Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Fulltime.	Parttime.	Fulltime.	Parttime.	
MASSACHUSETTS—continued.											
1	Chelsea.....	Municipal.....									
2	Chicopee.....	do.....									
3	Clinton.....	do.....									
4	Everett.....	do.....									
5		Instructive District Nursing Assn., 8 Forest Ave.									
6	Fall River.....	Municipal.....									
7		District Nursing Assn., 374 Anawan St.	8	8	788	6	8		8		
8		Union Hospital, social service department, 538 Prospect St.									
9	Fitchburg.....	Municipal.....									
10		Visiting Nursing Assn., 336 Main St.									
11	Frammingham.....	Municipal.....									
12		The Frammingham Nursing, Relief, and Anti-Tuberculosis Assn., South Frammingham.									
13	Gardner.....	Municipal.....									
14		Associated Charities.....									
15	Gloucester.....	Municipal.....									
16		Gloucester District Nursing Assn., City Hall.									
17	Greenfield.....	Municipal.....									
18		Mothers' Club.....	( <sup>1</sup> )	( <sup>2</sup> )							
19		Greenfield Visiting Nurse Assn., 17 Federal St.									
20	Haverhill.....	Municipal.....									
21	Holyoke.....	do.....	43	43	343	2	2		2		
22		Holyoke Infant Hygiene Assn., 34 Sargeant St.									
23	Lawrence.....	Municipal.....									
24		Sanitary Milk Committee, 31 Jackson St.	1	1	125	2	2	1	1		
25		Lawrence City Mission.....									
26	Leominster.....	Municipal <sup>10</sup> .....									
27	Lowell.....	do.....									
28		Lowell Guild, 17 Dutton St.	1	1	200	2	3		2		
29	Lynn.....	Municipal.....									
30		Day Nursery Assn. (baby clinic), 73 Blossom St.	3	3	141	1	2		2		
31	Malden.....	Municipal.....									
32		Milk and Baby Hygiene Society, 84 Linden Ave.	1	1	( <sup>10</sup> )	( <sup>11</sup> )	1				
33	Marlborough.....	Municipal.....									
34	Medford.....	do.....									
35		Medford Visiting Nurse Assn., 14 Salem St.									
36	Melrose.....	Municipal.....									
37		Melrose Hospital.....									
38	Methuen.....	Municipal.....									
39	Millford.....	do.....									

<sup>1</sup> Supplied by R. B. Frost General Hospital.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> City employs nurse of Instructive District Nursing Assn. for care of eyes of newborn infants.<sup>4</sup> In cooperation with District Nursing Assn.<sup>5</sup> Services of district nurse secured when necessary.<sup>6</sup> 5 drug-store substations to which milk is sent for distribution.<sup>7</sup> 1 assistant and 1 helper, with salary.



and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.	Supporting an obstetrical clinic.			
						2	11	2	11		11				
							1		1						
							2		2		2				
X	X		X	X		2		2							

<sup>8</sup> 4 in summer.

<sup>9</sup> Sent out by board of health.

<sup>10</sup> No information supplied.

<sup>11</sup> Cases are reported to Lowell Guild nurses.

<sup>12</sup> Services of tuberculosis nurse available for this work when necessary.

<sup>13</sup> Cooperation with family physician.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.								
			Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Summer.		Winter.		
							Full time.	Part time.	Full time.	Part time.	
	MASSACHUSETTS—continued.										
1	New Bedford.....	Municipal									
2		Instructive Nursing Assn., 202 Coffin Bldg.	3		357	3	11	9			
3	Newburyport.....	Municipal.									
4	Newton.....	do.									
5		Newton District Nursing Assn., <sup>1</sup> Newton Hospital.									
6	North Adams.....	Municipal.									
7		Visiting Nurse Aid Assn., 8 Spring St.									
8	Northampton.....	Municipal.									
9		District Nurse Assn.									
10	Peabody.....	Municipal <sup>2</sup> .									
11	Pittsfield.....	do.									
12	Plymouth.....	do.									
13	Quincy.....	do. <sup>1</sup> .									
14	Revere.....	do.									
15	Salem.....	do.	1		<sup>2</sup> 553	( <sup>4</sup> )	2				
16		District Nurse Committee of Woman's Friend Society, 12 Elm St.									
17	Somerville.....	Municipal.									
18		Somerville Visiting Nurse Assn., 1 Webster St.									
19	Southbridge.....	Municipal.									
20		Southbridge Visiting Nurse Assn., 18 Marcy St.	( <sup>3</sup> )	( <sup>1</sup> )							
21	Springfield.....	Municipal.									
22		Baby Feeding Assn., <sup>2</sup> 613 Main St.									
23		District Nurse Assn., <sup>2</sup> 613½ Main St.									
24	Taunton.....	Municipal.									
25	Wakefield.....	do.									
26		Visiting Nurse Assn., 5 Avon St.									
27	Waltham.....	Municipal.									
28		Waltham District Nursing Assn., Main St.									
29	Watertown.....	Municipal <sup>1</sup> .									
30	Webster.....	do.									
31		District nurse, S. Slater & Sons, Inc. <sup>1</sup>									
32	Westfield.....	Municipal.									
33		Westfield Visiting Nurse Assn., 13 Broad St.									
34	Weymouth.....	Municipal.									
35		Weymouth Visiting Nurse Assn., 178 Pleasant St. S.W.									
36	Winthrop.....	Municipal.									
37	Woburn.....	do.									
38	Worcester.....	do.									
39		Clean Milk Stations Committee <sup>2</sup> .	7		477	14	<sup>4</sup>				
40		Worcester Society for District Nursing, 27 Elm St.									
	MICHIGAN.										
41	Adrian.....	Municipal.									
42		Associated Charities, Lenawee County Bank Bldg.									
43	Alpena.....	Municipal.									

<sup>1</sup> No information supplied.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> Under 2 years of age.<sup>4</sup> General cooperation by physicians.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.						Supporting an obstetrical clinic.
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
	X						1				8					1
	X				X		9				8			X		2
							1				1			X		3
																4
																5
							2		1		1					6
													X	X		7
							(2)	(2)	(2)	(2)	(2)			X	X	8
														X	X	9
														X	X	10
														X	X	11
														X	X	12
														X	X	13
	X		X		X		1	1	1		1			X	X	14
																15
							2	2	2		2				X	16
																17
							1	1	1		1				X	18
							3						X	X	X	19
																20
																21
																22
																23
																24
							1		1		1			X	X	25
							3		3				X	X	X	26
																27
																28
																29
																30
																31
							1	1	1						X	32
																33
							1	1	1		1					34
																35
																36
	X		X		X	2		1	(2)	1	(2)		X	X	X	37
						1	(2)	1	(2)	1	(2)		X	X	X	38
																39
																40
																41
							1	1	1		1		X			42
															X	43

\* Nurses furnished by Waltham District Nursing Assn.

\* Executive officer of board of health acts as chairman.

\* 4 helpers.

\* Services of 10 general visiting nurses available when necessary.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.			Agency.			Infant-welfare stations.												
						Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.								
										Summer.		Winter.		Summer.		Winter.		
														Full time.	Part time.	Full time.	Part time.	
MICHIGAN—contd.																		
1	Ann Arbor.....	Municipal.....																
2		University of Michigan Hospital, Circle of King's Daughters.																
3	Battle Creek.....	Municipal.....																
4	Bay City.....	do.....																
5		Civic League Free Dispensary and Visiting Nurse Committee, 1009 Washington St.																
6	Detroit.....	Municipal (division of infant welfare).	4	4	1,413	5	8		5									
7		Babies' Milk Fund, 924 Brush St.	4	4	1,523	2	5		4									
8		Children's Free Hospital, St. Antoine St. and Farnsworth Ave.	1	1	1,395	4	2		2									
9		Visiting Nurse Assn., 924 Brush St.																
10	Escanaba.....	Municipal.....																
11	Flint.....	do.....	2	2	190	2		1										
12		Child Welfare Society.....																
13	Grand Rapids.....	Municipal.....																
14		Clinic for Infant Feeding, D. A. Bloodgett Home for Children, Louis and Market Sts.	2	2	921	14	5		5									
15	Holland.....	Municipal.....																
16	Ironwood.....	do.....																
17		Oliver Mining Co. visiting nurse <sup>1</sup> .....																
18	Ishpeming.....	Municipal.....																
19	Jackson.....	do.....																
20		Associated Charities, Wesley and Mechanic Sts.	1	1	( <sup>2</sup> )	1	1		1									
21	Kalamazoo.....	Municipal.....																
22		Kalamazoo Civic Improvement League, 223 N. Park St.																
23	Lansing.....	Municipal.....																
24	Manistee.....	do.....																
25	Marquette.....	do.....																
26		Visiting Nurse Assn., Room 26, Harlow Block.																
27	Menominee.....	Municipal.....																
28	Muskegon.....	do.....																
29		Visiting Nurse Assn., 101 Houston Ave.	1	1	20	( <sup>3</sup> )	1		1									
30		Hackley Hospital.....																
31	Pontiac.....	Municipal.....																
32	Port Huron.....	do.....																
33		Visiting Nurse Assn., of St. Clair County, 1416 Military St.																
34	Saginaw.....	Municipal.....																
35	Sault Ste. Marie.....	do.....																
36	Traverse City.....	do. <sup>4</sup> .....																
MINNESOTA.																		
37	Duluth.....	Municipal (division of child welfare).	3	1	300	3	3	2	2	2								
38		Scottish Rite Masons, infant-welfare department, Masonic Temple.	1	1	325	1	1		1									
39	Mankato.....	Municipal.....																
40		Visiting Nurse Assn., 129 S. Broad St.																
41	Minneapolis.....	Municipal.....																
42		Infant Welfare Society, 923 Plymouth Bldg.	4	4	( <sup>5</sup> )	5	4		4									

<sup>1</sup> 15 school nurses; 5 baby nurses.<sup>2</sup> Use board of health clinics.<sup>3</sup> 1 nurse; 1 assistant; employed by board of health.<sup>4</sup> Work reported. Detailed information not available.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.						Supporting an obstetrical clinic.
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
						1		1			1				1	
							2		2		4	×			2	
															3	
						2		2			2			×	4	
															5	
×	×			×		120		5			10	(3)	×	×	6	
											5				7	
											2				8	
						25		25			25				9	
×	×														10	
×	×	×	×	×											11	
															12	
															13	
															14	
															15	
															16	
															17	
							2		2						18	
×	×	×									1			×	19	
						1			1		2			×	20	
							2		2					×	21	
															22	
															23	
															24	
							1		1		1			×	25	
															26	
							1		1						27	
×	×		×												28	
											1			×	29	
															30	
														×	31	
							1		1		1			×	32	
															33	
															34	
						(9)	(9)	(9)	(9)					×	35	
															36	
×	×	×	×	×							3		×	×	37	
															38	
															39	
							1		1						40	
×	×		×	×	×						4			×	41	
															42	

\* Number not supplied.

\* Those on staff of Hackley Hospital.

Limited.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Full time.	Part time.	Full time.	Part time.	
MINNESOTA—contd.											
1	St. Cloud .....	Municipal.....									
2	St. Paul.....	do.....									
3		St. Paul Baby Welfare Assn., Wilder Bldg.....	1	1	675	6	4		4		
4	Stillwater.....	Municipal.....									
5	Virginia.....	do.....									
6	Winona.....	do.....									
7		Margaret Simpson Home.....									
MISSISSIPPI.											
8	Hattiesburg.....	Municipal.....									
9	Jackson.....	do.....									
10	Meridian.....	do.....									
11	Natchez.....	do.....									
12	Vicksburg.....	do.....									
MISSOURI.											
13	Hannibal.....	Municipal.....									
14	Jefferson City.....	do.....									
15	Joplin.....	do.....									
16	Kansas City.....	Municipal (division of child hygiene).....	5	5	(4)	2	1		1		
17		Institutional Church of North End, milk station, 1115 Charlotte St.....	1	1	130	1	1		1		
18		Minute Circle, 1518 Spruce Ave.....	1	1	150	1	1		1		
19		St. Luke's Hospital Club.....	1	1	(4)	(4)	1		1		
20		Swope Settlement.....	1	1	(4)	3		1		1	
21		Visiting Nurse Assn., 115 Charlotte St.....									
22	Moberly.....	Municipal.....									
23	St. Joseph.....	do.....									
24		Baby Welfare Assn., 72307 S. Sixth St.....	1	1	311	1	2		1		
25		St. Joseph Visiting Nurse Assn., 10 220 N. Ninth St.....									
26	St. Louis.....	Municipal.....									
27		Baby Welfare Assn., 12 Vanol Bldg.....	2	2	(4)	2	3		2		
28		Kingdom House, 1033 S. Eighth St.....	1	1	140	3	1		1		
29		St. Louis Pure Milk Commission, 12 1726 N. Thirteenth St.....	7	7	1,026	12	2		2		
30		Social service department, Washington University Hospital and the St. Louis Children's Hospital, Euclid and Kingshighway.....	1	1	(4)	15	1		1		
31		St. Louis Visiting Nurse Assn., 12 3908 Olive St.....									
32	Sedalia.....	Municipal.....									
33	Springfield.....	do.....									
34		Visiting Nurse Assn., Court House.....	1		77	(4)		2			
35	Webb City.....	Municipal.....									
MONTANA.											
36	Anaconda.....	Municipal.....									
37	Billings.....	do.....									
38	Butte.....	do.....									

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> No information supplied.<sup>3</sup> 3 for white babies; 2 for colored babies.<sup>4</sup> Number not supplied.<sup>5</sup> Special herd kept to supply milk to clinic babies.<sup>6</sup> Supervise the nurses of North End and Minute Circle milk stations and clinics.<sup>7</sup> City appropriated \$500 toward expenses of Baby Welfare Assn.<sup>8</sup> Employ nurses of St. Joseph Visiting Nurse Assn. for this work.<sup>9</sup> In addition, 3 specialists.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.  
being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				Supporting an obstetrical clinic.
×	×	×	×				1		1				×		1
															2
															3
															4
							1		1		1			1	5
															6
															7
															8
															9
															10
															11
															12
															13
	×	×		×							1		×		14
	×	×	×		×						1		×		15
	×	×			×						1				16
	×	×			×						1				17
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															34
															35
															36
															37
															38
															39
															40

<sup>10</sup> In cooperation with Baby Welfare Assn.

<sup>11</sup> Number of nurses not available.

<sup>12</sup> St. Louis Visiting Nurse Assn. supplies nurses for Baby Welfare Assn. and St. Louis Pure Milk Commission.

<sup>13</sup> Operated by St. Louis Pure Milk Commission.

<sup>14</sup> In addition, 1 infant feeding and instructive clinic at Kingdom House and 9 pure-milk distributing stations.

<sup>15</sup> Number receiving milk at stations; number enrolled, 1,897.

<sup>16</sup> Total number, including physicians from hospitals, 25.

<sup>17</sup> In addition, 1 social worker and many volunteers.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.							
			Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Summer.		Winter.	
							Fulltime.	Parttime.	Fulltime.	Parttime.
	MONTANA—contd.									
1	Great Falls.....	Municipal.....								
2	Helena.....	do.....								
3	Missoula.....	do.....								
	NEBRASKA.									
4	Grand Island.....	Municipal.....								
5	Lincoln.....	do. <sup>1</sup> .....								
6		Charity Organization Society, <sup>2</sup> 228 S. Tenth St.								
7	Omaha.....	Municipal.....								
8		Visiting Nurse Assn., 408 City Hall.....	1		35	2		8		
9	South Omaha.....	Municipal.....								
	NEVADA.									
10	Reno.....	Municipal.....								
	NEW HAMPSHIRE.									
11	Berlin.....	Municipal.....								
12		Berlin Instructive District Nursing Fund.								
13	Concord.....	Municipal.....								
14		Concord District Nursing Assn., Room 5, City Hall.								
15	Dover.....	Municipal.....								
16		District Nurse Assn., 171 Central Ave.								
17	Keene.....	Municipal.....								
18	Laconia.....	do. <sup>3</sup> .....								
19	Manchester.....	do. <sup>4</sup> .....								
20		Manchester District Nursing Assn., Beech and Merrimac Sts.	1	1	300		4	1	5	
21		Infant Aid Assn., <sup>5</sup> 118 Central St.....	3		266	4	4			
22	Nashua.....	Municipal.....								
23	Portsmouth.....	do.....								
24		Portsmouth District Nursing Assn., 29 Burkitt St.								
	NEW JERSEY.									
25	Asbury Park.....	Municipal.....								
26		Day Nursery of Child Welfare Assn., 907 Sewall Ave.								
27	Atlantic City.....	Municipal.....								
28		Organized Charities, 223 Guarantee Trust Bldg.								
29	Bayonne.....	Municipal.....								
30	Bloomfield.....	do.....								
31		League for Friendly Service, <sup>7</sup> 36 Broad St.	1	1	(*)	1		2		2
32	Bridgeton.....	Municipal.....								
33		City Nurse Committee, <sup>7</sup> 106 E. Com- merce St.								

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> City makes appropriation toward maintenance of nurse.<sup>3</sup> Classes held in Northside Neighborhood House.<sup>4</sup> No information supplied.



and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Supporting an obstetrical clinic.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.							
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.						
																	1
															X		2
															X		3
																	4
							1		1		1		X	X	X		5
																	6
X	X										8				X		7
															X		8
																	9
															X		10
																	11
							2		2		2			X	X		12
							1		1		1				X		13
																	14
							1		1								15
																	16
																	17
X	X		X	X	X						1			X	X		18
X	X	X	X	X	X												19
																	20
											4					X	21
																	22
							1		1								23
																	24
																X	25
							1		1								26
															1	X	27
							1		1								28
																	29
X	X											2				X	30
															1	X	31
																	32
							1		1		1						33

\* City appropriates \$300 toward expenses of Infant Aid Assn.

† Limited.

‡ Affiliated with American Red Cross Town and Country Nursing Service.

§ Number not supplied.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.			Agency.			Infant-welfare stations.								
						Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
						Summer.	Winter.			Sum-mer.		Win-ter.		
										Full time.	Part time.	Full time.	Part time.	
NEW JERSEY—contd.														
1	Camden.....	Municipal <sup>1</sup> .....												
2		Visiting Nurse Society, <sup>19</sup> Broadway..	1	1	212	(7)	5							
3	East Orange.....	Municipal <sup>2</sup> .....	2	2	124	1	1							
4		East Orange Aid to the Sick, <sup>3</sup> 11 N. Munn Ave.												
5	Elizabeth.....	Municipal.....												
6		Milk stations, St. Elizabeth's Hos- pital, <sup>4</sup> 8. Broad St.	2		133	(7)	(7)	(7)	(7)	(7)				
7		Visiting Nurse Assn., 122 Magnolia Ave.												
8	Garfield.....	Municipal.....												
9	Hackensack.....	do.....												
10		Children's Relief and General Welfare Society, Summit Ave.												
11	Harrison.....	Municipal.....												
12	Hoboken.....	do. <sup>5</sup> .....	(7)											
13	Irvington.....	do. <sup>6</sup> .....												
14	Jersey City.....	Municipal (division of child hygiene). Child Welfare Assn. <sup>11</sup>	1	1	442	1	1	10						
15		Municipal.....												
16	Kearny.....	do.....												
17	Long Branch.....	Long Branch Visiting Nurse Assn., City Hall.												
18		Municipal.....												
19	Millville.....	do.....	1	1	115	1		1						
20	Montclair.....	do.....												
21	Morristown.....	do.....												
22		Central Bureau of Social Service, 27 South St.												
23		Maternity Fund Assn., 42 Elm St.												
24		Neighborhood House Assn., <sup>8</sup> Flagler St.												
25	Newark.....	Municipal.....	3	3	1,729	1	3							
26		Babies Hospital, <sup>9</sup> 427 High St.												
27	New Brunswick.....	Municipal.....												
28		Visiting Nurses' Assn., 147 Bayard St.	1		10	7								
29	Orange.....	Municipal <sup>12</sup> .....	1	1	208	1	1							
30		Baby Welfare Assn. <sup>13</sup>												
31		Diet Kitchen of the Oranges, <sup>14</sup> 124 Essex Ave.	2	2	255	2	1	1	1	1				
32		Visiting Nurses' Assn. of Orange and West Orange, <sup>15</sup> 24 Valley St.	2	2	150	2		2						
33	Passaic.....	Municipal <sup>16</sup> .....												
34		Passaic Diet Kitchen Assn., <sup>17</sup> 115 Pas- saic St.												
35	Paterson.....	Municipal.....												
36	Perth Amboy.....	do.....												
37	Phillipsburg.....	do.....												
38	Plainfield.....	do.....												

<sup>1</sup> City council makes an appropriation toward expenses of Visiting Nurse Society.<sup>2</sup> General cooperation by physicians.<sup>3</sup> Infant-welfare work of the East Orange Aid to the Sick assumed by the health department Apr. 16, 1915. Work done in cooperation with that of the Baby Welfare Assn. of the Oranges.<sup>4</sup> Joint Milk Committee of the Oranges.<sup>5</sup> Work reported. Detailed information not available.<sup>6</sup> Partly supported by city funds.<sup>7</sup> Number not supplied.<sup>8</sup> No information supplied.<sup>9</sup> 8 months, from June 15, 1914, to Feb. 15, 1915.<sup>10</sup> School nurses.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
X	X	X	X	X	X						4		X	X	X	1
											1					2
				X	X		2							X	X	3
																4
																5
																6
																7
																8
																9
																10
																11
X	X		X	X			(1)		(2)		1		X	X	X	12
																13
																14
																15
																16
																17
																18
X	X															19
																20
																21
																22
																23
X	X		X										X	X	X	24
																25
X	X			X	X											26
X	X		X													27
X	X			X	X											28
																29
X	X	X	X	X	X											30
																31
																32
																33
																34
																35
																36
																37
																38

<sup>11</sup> Cooperates with division of child hygiene.

<sup>12</sup> Affiliated with Baby Welfare Assn. of the Oranges.

<sup>13</sup> Centralizing agency with which the following agencies are affiliated: Orange health department, Diet Kitchen of the Oranges, Visiting Nurses' Association of Orange and West Orange, the East Orange Aid to the Sick, the South Orange Society for Lending Comforts to the Sick, Civic Committee of the Woman's Club.

<sup>14</sup> Under 2 years of age.

<sup>15</sup> Figures for work in West Orange included with those for Orange. Work done in cooperation with that of the Baby Welfare Assn. of the Oranges.

<sup>16</sup> Aid of State department of health.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.							
			Num- ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Sum- mer.	Winter.	Sum- mer.	Winter.
							Full time.	Part time.	Full time.	Part time.
	NEW JERSEY—contd.									
1	Plainfield (contd)...	Baby Clinic and Day Nursery.....								
2		Charity Organization Society of Plain- field and North Plainfield, 323 Bab- cock Bldg.	1	1	29	2	4		4	
3		City Union of King's Daughters.....								
4		Visiting Nurse Assn., 324 Babcock Bldg.								
5	South Orange <sup>1</sup> .....	Society for Lending Comforts to the Sick, 361 Vose Ave.	1	1	49	1	1		1	
6	Trenton.....	Municipal.....								
7		Phi Gamma Epsilon Society, 138 Al- len St.	2	2	114		2		2	
8	Union.....	Municipal.....								
9	West Hoboken.....	do.....								
10	West New York.....	do.....								
11	West Orange.....	do.....								
12		Visiting Nurse Assn. <sup>2</sup> .....								
	NEW MEXICO.									
13	Albuquerque.....	Municipal.....								
	NEW YORK.									
14	Albany.....	Municipal.....								
15		Central Christian Mothers Union, 2 Ash Grove Place.	2		209	3	3			
16	Amsterdam.....	Municipal.....								
17		Child Welfare Assn., 222 E. Main St....	1		85	3	2			
18	Auburn.....	Municipal <sup>3</sup> .....								
19	Batavia.....	do. <sup>4</sup> .....								
20		Child Welfare Assn.....	2	2	82	( <sup>5</sup> )	1		1	
21	Binghamton.....	Municipal.....								
22		Rest Room Club, 107 Collier St.....	<sup>6</sup> 1	<sup>6</sup> 1	( <sup>6</sup> )		1		1	
23	Buffalo.....	Municipal.....	2	2	329	31	7		7	
24		Babies' Milk Dispensary of Buffalo, 181 Franklin St.	7	7	1,589	7	<sup>10</sup> 6		<sup>10</sup> 6	
25		District Nursing Assn., 181 Frank- lin St.								
26	Cohoes.....	Municipal.....								
27		State Charities Aid Assn., Cohoes Committee on Prevention of Tuber- culosis, City Hall.	1		51	( <sup>6</sup> )		2		
28	Corning.....	Municipal.....								
29		Social Service Society.....	1		29	( <sup>6</sup> )	<sup>11</sup> 1			
30	Cortland.....	Municipal.....								
31	Dunkirk.....	do.....								
32	Elmira.....	do.....								
33		Elmira Federation for Social Service.	1		16	2	2			
34	Fulton.....	Municipal <sup>5</sup> .....								
35		Women's Auxiliary.....								
36		Women's Civic League.....	1	1	( <sup>6</sup> )	( <sup>6</sup> )	1		1	
37	Geneva.....	Municipal <sup>5</sup> .....								
38	Glens Falls.....	do.....								

<sup>1</sup> Population under 10,000. Included in this table as having a part in the general plan of infant-welfare work in the Oranges.<sup>2</sup> Affiliated with Baby Welfare Assn. of the Oranges.<sup>3</sup> Between mothers and nurses.<sup>4</sup> Joint Milk Committee of the Oranges.<sup>5</sup> Figures for work in West Orange included with those for Orange. Work done in cooperation with that of the Baby Welfare Assn. of the Oranges.<sup>6</sup> No information supplied.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant-hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.			
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				
X	X		X	X	X						2				
X	X	X									1		X	X	
X	X			X	X			1		1					

<sup>1</sup> Number for 1 station; second station not opened until June, 1915.

<sup>2</sup> Work reported. Detailed information not available.

<sup>3</sup> Room where mothers can rest and feed their babies. President of club weighs and examines babies and gives advice to mothers and to expectant mothers. General cooperation by physicians.

<sup>4</sup> Nurses provided by District Nursing Assn.

<sup>5</sup> In addition to nurses attached to milk station maintained by Babies' Milk Dispensary of Buffalo.

<sup>6</sup> In addition, 1 social-service worker and 2 volunteer nurses.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city.	Agency.	Infant-welfare stations.							
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
			Summer.	Winter.			Sum-mer.		Winter.	
							Fulltime.	Parttime.	Fulltime.	Parttime.
	NEW YORK—contd.									
1	Glens Falls (contd.)	Child Welfare Committee, City Hall.	1	1	108	2	1	....	1	....
2	Gloversville.....	Municipal.....								
3		Day Nursery.....	1	....	175	1	2	....		
4		District Nurse Assn.....								
5	Hornell.....	Municipal.....								
6	Hudson.....	do.....								
7		Civic Improvement League, 602 Gifford Pl.	1	....	44	11	....	1	....	
8	Ithaca.....	Municipal.....	1	....	19	1	....	*1	....	
9		Visiting Nurse Assn., 512 Edgewood Pl.								
10		Ithaca Tuberculosis Committee, 222 E. State St.								
11	Jamestown.....	Municipal.....						(*)		(*)
12		Visiting Nurse Assn., New Market Bldg.	*1	*1	28	1	....	(*)	....	(*)
13	Johnstown.....	Municipal.....								
14		Visiting Nurse Assn., 20 N. Melcher St.								
15	Kingston.....	Municipal.....								
16	Lackawanna.....	do.....	(*)	....						
17	Little Falls.....	do.....								
18		Fortnightly Club.....	1	....	49	....	1	....		
19	Lockport.....	Municipal.....								
20	Middletown.....	do.....								
21	Mount Vernon.....	do.....	1	....	35	1	....	1	....	
22	New Rochelle.....	do.....								
23	New York.....	Municipal (bureau of child hygiene) *.	66	59	23,427	1066	114	....	59	....
24		Babies' Welfare Assn. of New York City, <sup>1</sup> Center and Walker Sts.								
25	(Bronx and Manhattan Boroughs.)	After Care Circle of Jewish Maternity Hospital, 133 Clinton St.	1	1	624	1	2	....	2	....
26		Babies Dairy, 511 W. Forty-first St....	3	3	636	2	5	....	5	....
27		Babies Hospital of the City of New York, 135 E. Fifty-fifth St.								
28		Bellevue and Allied Hospitals, social service department, <sup>14</sup> E. Twenty-sixth St. and First Ave.	1	1	468	2	6	....	6	....
29		Beth Israel Hospital, social service department, Monroe, Jefferson, and Cherry Sts.								
30		Bethany Mission of Broadway Tabernacle, <sup>15</sup> 455 Tenth Ave.								
31		Bryson Day Nursery, <sup>16</sup> 149 Avenue B.								
32		Children's Aid Society, 105 E. Twenty-second St.	7	1	(16)	107	7	....	7	....
33		Church of the Sea and Land, 61 Henry St.								
34		Emanuel Chapel, 737 E. Sixth St. ....								
35		Fordham Hospital, social service department, Crotona Ave. and Southern Blvd.	(16)	(16)						
36		Free Out-Door Maternity Clinic, 216 E. Seventy-sixth St.	1	1	1,300	14	8	....	8	....

<sup>1</sup> Work now carried on by Child Welfare Committee formerly distributed between Metropolitan Life Insurance nurse, visiting nurse employed by Women's Club, and the tuberculosis nurse.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> Time in station paid by board of health; nurses supplied by Ithaca Tuberculosis Committee.<sup>4</sup> Portion of nurse's time given to service in municipal milk station in summer.<sup>5</sup> Appropriation made by common council of the city board paying salary of 1 nurse employed by Visiting Nurse Assn. Nurse gives part time to station, which is open 2 afternoons a week.<sup>6</sup> July, 1914, to February, 1915.<sup>7</sup> 1 school nurse; 1 social worker.<sup>8</sup> The bureau of child hygiene cooperates with every private agency whose work it in any way touches.<sup>9</sup> Under 2 years of age.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.  
being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' League or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.			
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				
X	X	X	X	X							1		X	X	X
X	X		X	X					2		2			X	X
							1		1		1			X	X
X	X		X	X					1		1				X
X	X		X	X											X
									1		1				X
									1		1				X
									1		1		X	X	X
									1		1		X	X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
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									1		1			X	X
									1		1			X	X
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									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X
									1		1			X	X

<sup>10</sup> In summer; number in winter, 18.

<sup>11</sup> School nurses.

<sup>12</sup> Nurses follow up all cases reported by midwives.

<sup>13</sup> Composed of 80 organizations whose work touches directly or indirectly upon the welfare of babies.

<sup>14</sup> Acts as a clearing house in facilitating cooperation among all infant-welfare agencies.

<sup>15</sup> Work carried on by Fordham Hospital.

<sup>16</sup> Not available for infants under 1 year of age.

<sup>17</sup> In summer; in winter, 1.

<sup>18</sup> Between mothers and nurses.

<sup>19</sup> See Bellevue and Allied Hospitals.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.									
			Num- ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.					
			Summer.	Winter.			Sum- mer.		Winter.			
							Full time.	Part time.	Full time.	Part time.		
NEW YORK—contd.												
1	New York—Contd.	Good Samaritan Dispensary, Essex	1	1	690	3	2	....	2	....		
2	(Bronx and Manhat- tan Boroughs— Continued).	Gouverneur Hospital, social service department, foot of Gouverneur St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3		Harlem Hospital, visiting nurse de- partment, <sup>1</sup> One hundred and thirty- sixth St. and Lenox Ave.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4		Henry Street Settlement, 265 Henry St.	1	1	* 518	3	1	1	1	1		
5		Lebanon Hospital, social service de- partment, Westchester and Caldwell Aves.	1	1	573	2	2	....	2	....		
6		Little Missionaries' Day Nursery, <sup>2</sup> 93 St. Mark's Place.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7		Madison Square Church House, <sup>2</sup> 432 Third Ave.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8		Manhattan Maternity and Dispensary, 327 E. Sixtieth St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9		Manhattanville Nursery Assn., <sup>2</sup> 401 W. One hundred and twenty- seventh St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10		Metropolitan Hospital, Blackwell's Island.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11		Mount Sinai Hospital, social service department, One hundredth St. and Fifth Ave.	1	1	* 349	....	2	....	2	....		
12		Nathan Straus Pasteurized Milk Lab- oratories, 348 E. Thirty-second St.	* 17	* 8	.....	1	.....	.....	.....	.....	.....	.....
13		New York Assn. for Improving the Condition of the Poor, 105 E. Twenty-second St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
14		New York City Mission Society, Woman's Branch, 105 E. Twenty- second St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
15		New York Diet Kitchen Assn., 1 West Thirty-fourth St.	8	8	* 4,900	20	* 9	....	* 9	....		
16		New York Dispensary, 348 Spring St.	1	1	( <sup>1</sup> )	1	1	....	1	....		
17		New York Hospital, <sup>3</sup> 8 W. Six- teenth St.	1	1	( <sup>1</sup> )	( <sup>1</sup> )	1	....	1	....		
18		New York Medical College and Hos- pital for Women, social service de- partment, 191 W. One hundred and first St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
19		New York Milk Committee Health Center, 119 Washington St.	1	1	( <sup>1</sup> )	1	3	....	3	....		
20		New York Nursery and Child's Hos- pital, 161 W. Sixty-first St.	1	1	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )		
21		New York Post Graduate Hospital, Twentieth St. and Second Ave.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
22		The Presbyterian Hospital, visiting nurse department, <sup>2</sup> Seventieth St. and Madison Ave.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
23		Recreation Room and Settlement, 186 Chrystie St.	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

<sup>1</sup> Number not supplied.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> Under 2 years of age.<sup>4</sup> Includes 1 social worker.<sup>5</sup> Services of student nurses available.<sup>6</sup> Pasteurized milk laboratories.



and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.			
×	×			×	×					(1)	(1)	×	×	1
×	×	×	×	×							1		×	2
														3
														4
														5
														6
														7
						42	(5)	42	(5)		42	×	×	8
														9
														10
×	×										6	×	×	11
×		×	×	×	×									12
							13		13		13		×	13
							12		12		12		×	14
×	×	×	×	×							8		×	15
×	×												×	16
										10	1	×		17
														18
×	×												×	19
×											3	×		20
						1		1			(1)			21
														22
							1		1					23

<sup>1</sup> Between physicians and mothers only.

<sup>2</sup> In addition, 9 matrons and 7 assistant matrons. Some assistance by health-department nurses in summer.

<sup>3</sup> Work with children is simply in connection with wards and clinics of the hospital and is one branch of the social service department.

<sup>4</sup> Woman physician who cooperates with New York Diet Kitchen Assn.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.	Agency.	Infant-welfare stations.							
		Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
		Summer.	Winter.			Summer.		Winter.	
						Full time.	Part time.	Full time.	Part time.
NEW YORK—contd.									
1 New York—Contd.	Riverdale Health League, 254 Riverdale Ave., Riverdale.								
2 (Bronx and Manhattan Boroughs—Continued).	St. Luke's Hospital, social service department, One hundred and thirteenth St.								
3	St. Thomas' Chapel, <sup>1</sup> 230 E. Sixtieth St.								
4	Sloane Hospital for Women, social service department, Fifty-ninth St. and Tenth Ave.								
5	Sunnyside Day Nursery, 221 E. One hundred and fourth St.								
6	Washington Heights Hospital, social service department, <sup>1</sup> 554 W. One hundred and sixty-fifth St.								
7 (Brooklyn Borough)	Brooklyn Children's Aid Society, <sup>1</sup> 72 Schermerhorn St.								
8	Brooklyn Hospital, social service department, De Kalb Ave. and Raymond St.								
9	Brooklyn Bureau of Charities, district nursing committee, 80 Schermerhorn St.								
10	Greenpoint Settlement, 85 Java St.					* 1		* 1	
11	Lincoln Settlement, <sup>1</sup> 105 Fleet St.								
12	Little Italy Neighborhood House, <sup>1</sup> 146 Union St.								
13	Long Island College Hospital, <sup>1</sup> Henry St.								
14	St. Christopher's Hospital for Babies, 283 Hicks St.								
15	Williamsburg Hospital, social service department, Bedford Ave. and S. Third St.								
16	Willow Chapel House, 27 Columbia Pl.	1	1	205	1	1		1	
17 Newburgh	Municipal			146	(*)	1			
18 Niagara Falls	do.	1	1	160	1	1		1	
19 North Tonawanda	do.								
20	Infant Welfare Society	1		(*)	(*)		1		
21 Ogdensburg	Municipal <sup>1</sup>	(1)	(1)						
22 Olean	do.								
23	Olean Visiting Nurse Assn., 457 N. Union St.	1	1	* 101	(*)	2		2	
24 Ossining	Municipal	(1)	(1)			(1)		(1)	
25	District Nursing Assn., 25 Ann St.								
26 Oswego	Municipal								
27	Metropolitan Life Insurance Co., visiting nurse, 100 E. First St.								
28 Peekskill	Municipal								
29	Associated Charities, infant-welfare committee.	1	1	* 97	(*)	1	2		1
30 Plattsburg	Municipal	1	1	(*)		1	1		1
31 Port Chester	do.								
32	Woman's Club, <sup>1</sup> 38 Broad St.								
33 Poughkeepsie	Municipal	3	1	(1)	4	3		1	
34 Rensselaer	do.								

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> Assists nurses in health department station in Greenpoint in work among Polish mothers.<sup>3</sup> General cooperation by physicians.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.			
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.				
							1		1		1				1
							1		1		1				2
															3
							3		3		3	×		×	4
							1		1				×		5
															6
															7
							2		2		2				8
							33		33		28			×	9
											1				10
	×														11
															12
						1		1			1				13
							1		1		1				14
															15
×	×	×	×	×	×						1				16
×	×														17
															18
															19
															20
													(1)	(1)	21
×	×		×										×	×	22
															23
															24
							1		1					×	25
							1		1					×	26
															27
×	×		×						1		1				28
×	×	×	×												29
															30
×	×	×	×	×		(1)		(1)							31
															32
×	×	×	×	×		1		1					×	×	33
															34

1 Number not supplied.

2 From Oct. 1, 1914, to Apr. 27, 1915.

3 From July 27, 1914, to Apr. 27, 1915.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Full time.	Part time.	Full time.	Part time.	
NEW YORK—contd.											
1	Rochester.....	Municipal.....	13		2,351	3	17			8	
2		Rochester General Hospital, social service department.	1	1	(1)	(1)		1		1	
3	Rome.....	Municipal.....									
4	Saratoga Springs.....	do.....									
5	Schenectady.....	do.....	1	1	200	2	2			2	
6	Syracuse.....	do.....	1		(1)	(2)	5				
7		Infant Welfare Assn., 600 E. Genesee St.	3	1	850	8	8	3	1		
8		Solvay Infant Welfare Assn., 600 E. Genesee St.	1		83	(2)	1				
9		Visiting Nurse Assn. of Syracuse, 511 S. Warren St.									
10	Troy.....	Municipal.....									
11		Instructive District Nursing Assn., 1600 Seventh Ave.									
12	Utica.....	Municipal.....									
13		Baby Welfare Committee of Utica, 511 Varick St.	3	3	434	8	3			2	
14	Watertown.....	Municipal.....									
15		Bureau of Charities and Society for Prevention of Cruelty to Children, 224 Massey Ave.									
16		Visiting Nurse Assn., 113 Park Pl.									
17	Watervliet.....	Municipal *.....									
18	White Plains.....	do.....	1		45	1		1			
19		White Plains Nursing Assn.,* 53 Hamilton Ave.									
20	Yonkers.....	Municipal.....	4	4	1,097	14	4			4	
21		Milk Committee *.....									
22		Yonkers Homeopathic and Maternity Hospital.*									
NORTH CAROLINA.											
23	Asheville.....	Municipal.....	1	1	24	3		1		1	
24		Flower Mission and Associated Charities and Free Medical Dispensary.									
25	Charlotte.....	Municipal.....									
26	Durham.....	do.....									
27	Greensboro.....	do.....									
28		Associated Charities.....									
29		Proximity Manufacturing Co., welfare department, White Oak Mills.									
30	Raleigh.....	Municipal.....									
31	Wilmington.....	do.....									
32		King's Daughters.....									
33		Red Cross Society *.....									
34	Winston.....	Municipal.....									
35		Wayside Workers.....									
NORTH DAKOTA.											
36	Fargo.....	Municipal.....									
37		Associated Charities of Fargo, City Hall.									
38	Grand Forks.....	Municipal.....									
39		Associated Charities,* City Hall.....									

1 Number not supplied.

2 No information supplied.

3 In summer; 1 in winter.

4 Board of Education in cooperation with Baby Welfare Committee of Utica.

5 Work reported. Detailed information not available.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
×	×	×	×	×						1	8		×	×	×	1
×	×	×	×	×							2	×	×		×	2
×	×	×	×	×							5				×	3
×	×	×	×	×							8				×	4
×	×	×	×	×							1				×	5
×	×	×	×	×							1				×	6
×	×	×	×	×							7				×	7
×	×	×	×	×							7				×	8
×	×	×	×	×							7				×	9
×	×	×	×	×							4				×	10
×	×	×	×	×							4				×	11
×	×	×	×	×							3		×	×	×	12
×	×	×	×	×							3		×	×	×	13
×	×	×	×	×							12		×	×	×	14
×	×	×	×	×							12		×	×	×	15
×	×	×	×	×	×						1				×	16
×	×	×	×	×		(9)	(9)				(9)				×	17
×	×	×	×	×											×	18
×	×	×	×	×											×	19
×	×	×	×	×											×	20
×	×	×	×	×											×	21
×	×	×	×	×											×	22
×	×	×	×	×							1				×	23
×	×	×	×	×											×	24
×	×	×	×	×											×	25
×	×	×	×	×											×	26
×	×	×	×	×											×	27
×	×	×	×	×											×	28
×	×	×	×	×											×	29
×	×	×	×	×											×	30
×	×	×	×	×											×	31
×	×	×	×	×											×	32
×	×	×	×	×											×	33
×	×	×	×	×							1				×	34
×	×	×	×	×											×	35
×	×	×	×	×											×	36
×	×	×	×	×							1				×	37
×	×	×	×	×											×	38
×	×	×	×	×							1				×	39

\* Supplies milk for municipal stations, furnishes physicians for clinics, organizes Little Mothers' Leagues.

† Under 2 years of age.

‡ Affiliated with American Red Cross Town and Country Nursing Service. Work reported. Detailed information not available.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

			Infant-welfare stations.							
State and city.	Agency.	Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
		Summer.	Winter.			Sum-mer.		Winter.		
						Full time.	Part time.	Full time.	Part time.	
OHIO.										
1 Akron.....	Municipal.....									
2	George T. Perkins Visiting Nurse Assn., 269 South High St.	1	1	(1)	(1)		4			4
3	Mary Day Nursery, <sup>1</sup> Central Office Bldg.									
4 Alliance.....	Municipal <sup>2</sup> .....	(2)	(2)							
5 Ashtabula.....	do.....									
6 Bellaire.....	do.....									
7 Cambridge.....	do.....									
8	Public Health League, Room 8, I. O. O. F. Bldg.									
9 Canton.....	Municipal.....									
10 Chillicothe.....	do.....									
11	Associated Charities.....									
12	Ross County Anti-Tuberculosis Society, 121 W. Main St.									
13 Cincinnati.....	Municipal (child hygiene division).....	9		758	11	14				
14	Children's Clinic of the Ohio-Miami Medical College, <sup>4</sup> McMicken and Elm Sts.	2	2	557	14	4			3	
15	Hospital Social Service Assn., Cincinnati Hospital.									
16	Jewish Settlement <sup>5</sup> .....	(2)	(2)							
17	Maternity Society of the Protestant Episcopal Church, <sup>7</sup> 220 W. Seventh St.									
18	Union Bethel Settlement, 501 E. Third St.	1	1	(2)	2	2			1	
19	Visiting Nurse Assn. of Cincinnati, 220 W. Seventh St.									
20 Cleveland.....	Municipal (bureau of child hygiene), 2500 E. Thirty-fifth St.	16	16	6,525	122	138			38	
21	Babies' Dispensary and Hospital.....									
22	Maternity Hospital, <sup>1</sup> 3735 Cedar Ave.									
23	St. Luke's Hospital, 6606 Carnegie Ave. SE.									
24	Visiting Nurse Assn. of Cleveland, 612 St. Clair Ave. NE.									
25	Western Reserve Maternity Dispensary (Lakeside Hospital), 3509 E. Thirty-fifth St. SE.									
26 Columbus.....	Municipal.....									
27	Instructive District Nursing Assn.....	6	6	1,105	5	11			11	
28	West Side Social Center, <sup>12</sup> 511 W. Broad St.									
29 Dayton.....	Municipal.....									
30	Visiting Nurse Assn., 127 S. Ludlow St.	5	1	1,526	6	12			10	
31 East Liverpool.....	Municipal.....									
32 Elyria.....	do.....									
33 Findlay.....	do.....									

<sup>1</sup> No information supplied.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> School nurses.<sup>4</sup> Cooperates closely with Maternity Society of the Protestant Episcopal Church; supplies nursing service for out-patient department, Cincinnati Hospital.<sup>5</sup> Nursing service supplied by Children's Clinic of the Ohio-Miami Medical College.<sup>6</sup> Furnishes room for one of municipal stations.<sup>7</sup> Nurses under supervision of Visiting Nurse Assn. of Cincinnati; cooperates closely with Children's Clinic of the Ohio-Miami Medical College.

**TABULAR STATEMENT OF INFANT-WELFARE WORK.**

79

*and towns having a population in 1910 of 10,000 and over, 1915—Continued.*

being done in the field designated.]

[illegible]

\* Number not supplied.

• Resident; including nonresident, 9.

2 additional during 3 months.

11 7 additional during 3 months.

<sup>12</sup> By internes and student nurses.

<sup>12</sup> Provides a room for one of the babies' clinics of the Instructive District Nursing Assn.

<sup>14</sup> Under 2 years of age.

**15 In addition, a visiting housekeeper is employed.**

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.			Agency.			Infant-welfare stations.							
						Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
						Summer.	Winter.			Sum-mer.		Winter.	
										Full time.	Part time.	Full time.	Part time.
1	OHIO—continued.												
2	Hamilton.....	Municipal.....											
3	Ironton.....	Federated Charities, <sup>1</sup> 327 S. Second St.											
4	Lakewood.....	Municipal.....											
5		do.....											
6	Lancaster.....	Visiting Nurse Assn. <sup>1</sup> .....											
7		Municipal.....											
8	Lima.....	Anti-Tuberculosis Society, 140 Kirn Bldg.	1	1	28					1		1	
9		Municipal.....											
10	Lorain.....	Instructive Visiting Nurse Assn., 817 E. Elm St.											
11	Mansfield.....	do.....											
12		Visiting Nurse Assn.....											
13	Marietta.....	Municipal.....											
14	Marion.....	do.....											
15		City Federation of Women's Clubs, 301 S. State St.	1		* 8	(9)				1		1	
16		King's Daughters.....											
17	Massillon.....	Municipal.....											
18	Middletown.....	do.....											
19		Social Service Bureau, 512 E. Third St.											
20	Newark.....	Municipal.....											
21	Norwood.....	do.....											
22	Piqua.....	do.....											
23	Portsmouth.....	do.....											
24	Sandusky.....	do.....											
25	Springfield.....	do.....											
26		Babies' Milk Dispensary and Fresh Air Camp, 353 E. High St.	2		110	4		1	3				
27	Steubenville.....	Municipal.....											
28	Tiffin.....	do.....											
29	Toledo.....	do.....	3	6	7 244	1		3			3		
30		Toledo District Nurse Assn., 1517 Monroe St.	1	1	300	2			15			15	
31	Warren.....	Municipal.....											
32	Youngstown.....	do.....											
33		Youngstown Sheet & Tube Co., East Youngstown.											
34		Visiting Nurse Assn., 102 E. Front St.											
35		Youngstown Hospital Dispensary, Francis St.											
36	Zanesville.....	Municipal.....											
OKLAHOMA.													
37	Chickasha.....	Municipal.....											
38	Enid.....	do.....											
39	Guthrie.....	do.....											
40	McAlester.....	do.....											
41		Visiting Nurse Assn. <sup>1</sup> .....											

<sup>1</sup> No information supplied.<sup>2</sup> Work conducted by Visiting Nurse Assn. of Cleveland.<sup>3</sup> Between mothers and nurses.<sup>4</sup> Work reported. Detailed information not available.





TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Full time.	Part time.	Full time.	Part time.	
1	OKLAHOMA—contd.										
2	Muskogee.....	Municipal.....									
3	Oklahoma City.....	do.....									
4	Shawnee.....	Provident Assn. <sup>1</sup> .....									
5	Tulsa.....	Municipal.....									
	OREGON.										
6	Portland.....	Municipal.....									
7	Salem.....	do.....									
	PENNSYLVANIA.										
8	Allentown.....	Municipal.....									
9	Altoona.....	do.....									
10		East Side Sunshine Society, 507 Second St.									
11	Beaver Falls.....	Municipal.....									
12	Bethlehem.....	do.....									
13	Brad dock.....	do.....									
14	Bradford.....	do.....									
15	Butler.....	do.....									
16		Women's Industrial Club.....									
17	Carbondale.....	Municipal.....									
18	Carlisle.....	do.....									
19	Carnegie.....	do.....									
20	Chambersburg.....	do.....									
21	Chester.....	do. <sup>1</sup> .....									
22	Coatesville.....	do.....									
23	Columbia.....	do. <sup>1</sup> .....									
24	Connellsville.....	do.....									
25	Dubols.....	do.....									
26	Dunmore.....	do.....									
27	Duquesne.....	do. <sup>1</sup> .....									
28	Easton.....	do.....									
29		St. John's Lutheran Church, 330 Ferry St.									
30	Erie.....	Municipal.....									
31		Visiting Nurse Assn., 522 German St.	1	1	240	(*)	5		4		
32	Farrell <sup>2</sup> .....	Municipal.....									
33	Greensburg.....	do.....									
34	Harrisburg.....	do.....									
35		Visiting Nurse Assn., 1109 Green St.	1		(*)	2	1				
36	Hazleton.....	Municipal.....									
37		United Charities of Hazleton, 17 S. Wyoming St.									
38	Homestead.....	Municipal.....									
39	Johnstown.....	do.....									
40		Associated Charities of Greater Johnstown, 3 Hannan Bldg.	2		40	3	1	1			
41		Cambria County Civic Club.....									
42	Lancaster.....	Municipal.....									
43	Lebanon.....	do.....									
44		Visiting Nurse Assn., City Hall.....									

<sup>1</sup> No information supplied.<sup>2</sup> Work reported. Detailed information not available.<sup>3</sup> Additional nurses employed from time to time.<sup>4</sup> Number not supplied.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
							1		1					×		1
							1		1						×	2
																3
																4
																5
																6
																7
						( <sup>2</sup> )		( <sup>2</sup> )							×	8
						1		1			1				×	9
																10
																11
																12
							1		1		1			×	×	13
																14
																15
																16
																17
																18
																19
																20
																21
																22
																23
																24
																25
																26
																27
																28
																29
																30
×	×		×	×	×	1		1			1	4		×	×	31
																32
×	×		×								1					33
																34
							1		1		1					35
																36
																37
																38
×	×	×	×	×					1					×	( <sup>2</sup> )	39
																40
							1		1		1					41
																42
							1		1		1			×	×	43
																44

<sup>1</sup> Formerly South Sharon.

<sup>2</sup> Upon the invitation of the city a study of the milk supply was made by the Dairy Division, U. S. Department of Agriculture, May, 1913.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is]

State and city.	Agency.	Infant-welfare stations.							
		Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
		Summer.	Winter.			Summer.		Winter.	
						Full time.	Part time.	Full time.	Part time.
PENNSYLVANIA—continued.									
1	McKees Rocks.....	Municipal.....							
2	McKeesport.....	do.....							
3	Mahanoy City.....	do.....							
4	Meadville.....	do.....							
5		Visiting Nurse Assn., 691 Highland Ave.							
6	Monessen.....	Municipal.....							
7		Board of Charities <sup>1</sup> .....							
8	Mount Carmel.....	Municipal.....							
9	Nantlooke.....	do.....							
10	New Castle.....	do.....							
11		Visiting Nurse Assn., <sup>2</sup> 319 Minter Ave.							
12	Norristown.....	Municipal.....							
13		Associated Charities, 325 Swede St.							
14	North Braddock.....	Municipal.....							
15	Oil City.....	do.....							
16	Old Forge.....	do.....							
17	Philadelphia.....	Municipal (division of child hygiene).....	44	44	( <sup>3</sup> )	( <sup>3</sup> )	18		18
18		Babies' Welfare Assn., <sup>4</sup> City Hall	11	11			2	2	2
19		Child Federation, <sup>7</sup> Weightman Bldg.	112	112	235	2	2	3	3
20		Babies' Hospital, 609 Addison St.			289	2	3	1	3
21		Henry Phipps Institute, <sup>10</sup> Seventh and Lombard Sts.							
22		Baptist Settlement House, 1156 Passyunk Ave.	1	1	( <sup>5</sup> )	1	1		1
23		Children's Homeopathic Hospital, Franklin and Thompson Sts.	1	1	500	31	6		6
24		Children's Hospital, social service department, 210 S. Van Pelt St.	13	13		7	(14)		(14)
25		Cohocksink Mothers' Club, schoolhouse, Fourth St. and Montgomery Ave.	1	1	100	2	(14)		(14)
26		Community House, <sup>15</sup> 1530 S. Second St.							
27		Douglas Hospital, social service department, 1530 Lombard St.							
28		Episcopal Hospital, social service department, Front St. and Lehigh Ave.							
29		Frankford Hospital, social service department, Frankford and Wakeling Sts.							
30		Friends' Neighborhood Guild, <sup>15</sup> Fourth and Green Sts.	(15)	(15)					
31		Hahnemann Hospital, social service department, Fifteenth and Race Sts.							
32		Howard Hospital, social service department, Broad and Catherine Sts.							

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> Limited. By volunteer inspectors.<sup>3</sup> No information supplied.<sup>4</sup> Prophylactic clinics. Held once a week in winter; every day in summer.<sup>5</sup> Originally conducted as an experiment by the Child Federation; now part of the school curriculum.<sup>6</sup> Centralizing agency, composed of organizations interested in the care of babies and children, and having for its purpose the avoidance of duplication of work and the formulation of a comprehensive program of baby work.<sup>7</sup> Formerly the Child Hygiene Committee. As reorganized, its purpose is actively to advance, by original and constructive methods, the best interests of babies and children in Philadelphia.



TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.	Agency.	Infant-welfare stations.							
		Number.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
		Summer.	Winter.			Summer.		Winter.	
						Full time.	Part time.	Full time.	Part time.
PENNSYLVANIA—continued.									
1 Philadelphia (con.)	Jefferson Hospital, social service department, Tenth and Sansom Sts.								
2	Medico-Chirurgical Hospital, social service department, Eighteenth and Cherry Sts.								
3	Methodist Episcopal Deaconesses' Home, 611 Vine St.	1	1	(1)	1	1		1	
4	Mothers' Community House, 1401 S. Front St.	1	1	(1)	(1)	2		2	
5	Mt. Sinai Hospital, Fifth and Reed Sts.	1	1	145	2		(1)		(1)
6	Osteopathic Society, 410 S. Ninth St.	2	2	50	3	1		1	
7	Pennsylvania Hospital, social service department, Eighth and Spruce Sts.								
8	Philadelphia General Hospital, social service department, Thirty-fourth and Pine Sts.								
9	Polyclinic Hospital, social service department, Eighth and Lombard Sts.								
10	Presbyterian Hospital, social service department, Thirty-ninth and Filbert Sts.	1	1	* 263	1	1		1	
11	Roosevelt Hospital, social service department, 710 N. Fifth St.	1		(1)	4	(1)	(1)		
12	Samaritan Hospital, social service department, 3403 N. Broad St.								
13	St. Christopher's Hospital for Children, social service department, Lawrence and Huntington Sts.	1	1	400	4	3		3	
14	Southwark Neighborhood House, 101 Ellsworth St.								
15	Starr Center Assn., 725 Lombard St.	1	1	* 805	2	3		3	
16	University of Pennsylvania Settlement House, Twenty-sixth and Lombard Sts.	1	1	25	3	1		1	
17	University of Pennsylvania Hospital, social service department, Thirty-fourth and Spruce Sts.								
18	Visiting Nurse Society of Philadelphia, 1340 Lombard St.								
19	West Philadelphia Hospital for Women, social service department, 4035 Parrish St.								
20	Woman's Hospital, social service department, 2137 N. College Ave.	1	1	(1)	6	1		1	
21	Woman's Southern Homeopathic Hospital, social service department, 739 S. Broad St.								
22 Phoenixville	Municipal								
23 Pittsburgh	Municipal (bureau of child welfare)	20	7	2, 771	10	15			15
24	Babies Dispensary of the Tuberculosis League, 2857 Bedford Ave.	2	2	3, 000	2	4		4	
25	Pittsburgh Maternity Dispensary, 3406 Fifth Ave.								

\* No information supplied.

\* Between mothers and nurses.

\* General nursing staff.

\* Work reported. Detailed information not available.

- Under 2 years of age.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
						1		1								1
						1	1	1	1		1					2
×	×				×						1				×	3
×	×										2				×	4
×	×	×									(4)		×			5
													×			6
																7
						(4)		(4)		(4)	(4)					8
																9
	×		×													10
×		×								(1)	(1)	×		×		11
×	×					1		1			1	×		×		12
														×		13
																14
×	×	×		×						1				×		15
×	×			×						1				×		16
						1		1			1					17
						(4)	(4)	(4)	(4)	(4)	(4)					18
											(4)	×				19
×	×		×	×	×					(1)	(1)	×		×		20
							1		1		1					21
×	×	×	×	×	×						15		×	×	×	22
×	×		×	×										×		23
										1	4	×		×		24
																25

\* Work incidental to general nursing work.

† Number not supplied.

‡ Social worker.

§ Maintains prenatal clinic in 8 different sections of the city.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.	Agency.	Infant-welfare stations.							
		Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.			
		Summer.	Winter.			Sum-mer.		Winter.	
						Full time.	Part time.	Full time.	Part time.
PENNSYLVANIA—continued.									
1 Pittston .....	Municipal.								
2 .....	Visiting Nurse Assn. of Pittston and West Pittston, 59½ S. Main St.								
3 Plymouth .....	Municipal.								
4 Pottstown .....	do.								
5 Pottsville .....	do.								
6 Reading .....	do.								
7 .....	Visiting Nurse Assn., 4291 Walnut St.	*4	*1	202	12		6		6
8 Scranton .....	Municipal.								
9 Shamokin .....	do.								
10 .....	Shamokin Visiting Nurse Assn., 800 E. Sunbury St.								
11 Sharon .....	Municipal <sup>4</sup> .								
12 Shenandoah .....	do.								
13 South Bethlehem .....	do.								
14 Steelton .....	do.								
15 .....	Civic Club.								
16 Sunbury .....	Municipal.								
17 .....	Organized Charity Committee <sup>4</sup> .								
18 Uniontown .....	Municipal.								
19 Warren .....	do.								
20 Washington .....	do.								
21 West Chester .....	do.								
22 Wilkes-Barre .....	do.								
23 .....	Visiting Nurse Assn., 40 N. Washing-ton St.	2	2	194	( <sup>5</sup> )		6		6
24 Wilkinsburg .....	Municipal.								
25 Williamsport .....	do.								
26 York .....	do.								
27 .....	Visiting Nurse Assn., 800 E. Market St.	1	1	125	2	3		2	
RHODE ISLAND.									
28 Central Falls .....	Municipal.								
29 Cranston (post-office, Providence) .....	do.								
30 .....	Cranston Anti-Tuberculosis Assn., 49 Nichols St.	1	1				2		2
31 Cumberland .....	Municipal.								
32 East Providence .....	do.								
33 .....	District Nursing and Anti-Tubercu-losis Assn., 18 Taunton Ave.	1	1	( <sup>5</sup> )	1		2		2
34 Newport .....	Municipal.								
35 .....	Newport Hospital, visiting nurse de-partment.								
36 Pawtucket .....	Municipal.								
37 .....	Associated Charities, 209 Oak Hall.	1	1	301	2	1		1	
38 .....	Visiting Nurse Assn., 209 Oak Hall.	1	1	*217	1	1		1	
39 Providence .....	Municipal (division of child hygiene).								
40 .....	Providence District Nursing Assn., 109 Washington St.	5	5	*2,980	( <sup>5</sup> )	6		2	
41 .....	Baby Welfare Committee <sup>6</sup> .					9		7	
42 Warwick .....	Municipal <sup>5</sup> .								
43 .....	Warwick Health League, Apponaug.								

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> Station open one afternoon each week.<sup>3</sup> No information supplied.<sup>4</sup> Provides milk for poor and sick babies. Mothers given instruction. No nurses.<sup>5</sup> Number not supplied.<sup>6</sup> For period of 8 months.



and towns having a population in 1910 of 10,000 and over, 1915—Continued.  
being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.	
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
							3		3		3					1
																2
							1		1							3
																4
																5
X	X	X	X											X		6
																7
							1		1		1					8
														X		9
																10
																11
																12
							1		1							13
														X		14
																15
																16
																17
																18
															X	19
																20
X	X	X	X								5				X	21
																22
																23
X	X	X		X							3			X		24
																25
																26
																27
																28
X	X		X								2			X		29
																30
X	X	X	X								2			X		31
																32
														X		33
																34
							3		3					X		35
																36
X	X	X	X								1					37
X	X										1			X		38
X	X										7			X		39
																40
																41
																42
							1		1		1					43

\* Includes 2 school nurses.

† Age not specified.

‡ Composed of representatives from the health department, Providence District Nursing Assn., Providence branch, Congress of Mothers, Council of Jewish Women, Immigration Education Assn., and Federal Hill Assn.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

[Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Win-ter.		
							Full time.	Part time.	Full time.	Part time.	
1	RHODE ISLAND—CON.										
2	Woonsocket.....	Municipal..... Woonsocket Anti-Tuberculosis Assn. and District Nursing Assn., 194 Main St.									
	SOUTH CAROLINA.										
3	Charleston.....	Municipal.....									
4	Columbia.....	do.....									
5	Greenville.....	Columbia Children's Clinic <sup>1</sup> .....									
6		Municipal.....									
7		Children's Charity Circle, <sup>2</sup> 406 Arling- ton Ave.									
8	Spartanburg.....	Municipal.....									
9		Health League									
	SOUTH DAKOTA.										
10	Aberdeen.....	Municipal.....									
11	Sioux Falls.....	do.....									
	TENNESSEE.										
12	Chattanooga.....	Municipal.....									
13	Jackson.....	do.....									
14	Knoxville.....	do.....									
15		Child's Free Clinic <sup>3</sup> .....	1	1	(9)	12	1			1	
16	Memphis.....	Municipal.....	1	1	2,309	7	11			5	
17		Associated Charities									
18	Nashville.....	Municipal (bureau of infant welfare).....	4	4	(9)	4	4			4	
	TEXAS.										
19	Austin.....	Municipal.....									
20	Beaumont.....	do.....									
21	Brownsville.....	do.....									
22	Cleburne.....	do. <sup>4</sup> .....									
23	Dallas.....	do.....									
24		Infants' Welfare and Milk Assn. of Dallas, 1307 Southerstone Life Bldg.	2	2	1,130	8	2			2	
25	Denison.....	Municipal <sup>5</sup> .....									
26	El Paso.....	do.....									
27		Woman's Charity Assn., <sup>6</sup> 405 S. Camp- bell St.									
28	Fort Worth.....	Municipal.....									
29		Visiting Nurse Assn. <sup>7</sup> .....									
30	Galveston.....	Municipal.....									
31	Houston.....	do.....	(1)								
32		Houston Settlement Assn., 61 Gabel St. Social Service Federation, Court- house.	1	1	* 250	10	2	1	2	1	
33		Municipal.....									
34	Laredo.....	do.....									
35	Marshall.....	do.....									
36		Civic Club <sup>8</sup> .....									
37	Palestine.....	Municipal.....									
38	Paris.....	do.....									

<sup>1</sup> Work reported. Detailed information not available.<sup>2</sup> Affiliated with American Red Cross Town and Country Nursing Service.<sup>3</sup> Services discontinued.<sup>4</sup> By school nurse.<sup>5</sup> Children under 12 years of age received.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.  
being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.			Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.					
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.						
							1		1		1				X	1	2
						(1)		(1)							<sup>1</sup> X	3	4
															<sup>1</sup> X	5	6
							1		1		1				X	6	7
							<sup>1</sup> 1		<sup>1</sup> 1						<sup>1</sup> X	8	9

\* Number not supplied.  
† Includes 6 school nurses.  
‡ No information supplied.  
§ Age not specified.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

	State and city	Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Winter.		
							Full time.	Part time.	Full time.	Part time.	
TEXAS—continued.											
1	San Angelo.....	Municipal.....									
2	San Antonio.....	do.....									
3	Sherman.....	do. <sup>1</sup> .....									
4	Temple.....	do.....									
5	Texarkana <sup>1</sup> .....	do.....									
6	Tyler.....	do. <sup>1</sup> .....									
7	Waco.....	do. <sup>1</sup> .....									
UTAH.											
8	Ogden.....	Municipal.....									
9	Salt Lake City.....	do.....	5	1	( <sup>2</sup> )	*1	6			1	
10		Neighborhood House <sup>1</sup> .....									
VERMONT.											
11	Barre.....	Municipal.....									
12	Burlington.....	do.....									
13		Visiting Nurse Assn., 174 Pearl St.....	1	1	125	1	2		3		
14	Rutland.....	Municipal.....									
15		Missionary Assn., Mead Bldg.....									
VIRGINIA.											
16	Alexandria.....	Municipal.....									
17		Instructive Visiting Nurse Society <sup>1</sup> .....									
18	Danville.....	Municipal.....									
19		The Ministering Circle of King's Daughters, 101 Mount Vernon Ave. Wesley House, <sup>1</sup> Upper St.....									
20	Lynchburg.....	Municipal.....									
21	Newport News.....	do.....									
22	Norfolk.....	do.....									
23		King's Daughters Visiting Nurse Assn., 314 W. Freeman St.....	2	2	( <sup>2</sup> )	2	4	*5	4	*5	
24		do.....									
25	Petersburg.....	Municipal.....									
26	Portsmouth.....	do. <sup>1</sup> .....									
27	Richmond.....	do.....									
28		Visiting Nurse Assn., 223 S. Cherry St.....									
29	Roanoke.....	Municipal.....									
30	Staunton.....	do.....									
31		Community Welfare League.....									
WASHINGTON.											
32	Aberdeen.....	Municipal.....									
33	Bellingham.....	do.....									
34	Everett.....	do.....									
35		Snohomish County public health nurse, county commissioner's office.									
36	North Yakima.....	Municipal.....									
37	Seattle.....	Municipal (child welfare division) <sup>1</sup> .....									
38		Deaconess Settlement, 1519 Rainier Ave.									
39		Fruit and Flower Mission, 52 Cobb Bldg.	1	1	( <sup>2</sup> )	1	1		1		
40		King County public health nurse, <sup>2</sup> 510 Cobb Bldg.									

<sup>1</sup> No information supplied.<sup>2</sup> See Texarkana, Ark.<sup>3</sup> Number not supplied.<sup>4</sup> 1 regular; 2 additional when needed.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.									
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.		Supporting an obstetrical clinic.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.				
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.								
																			1
																			2
																			3
																			4
																			5
																			6
																			7
																			8
X	X	X	X	X									X		X				9
															X				10
																			11
	X		X											X	X				12
							1		1						X				13
															X				14
																			15
															X				16
						1		1		1					X				17
																			18
							2		2					X	X				19
															X	X			20
X	X			X	X						8		X	X	X				21
															X	X			22
															X	X			23
							7		7		5			X	X	X			24
							10		10		10			X	X	X			25
														X	X	X			26
							1		1		1			X	X	X			27
															X	X			28
															X	X			29
															X	X			30
																			31
																			32
							1		1						X				33
															X				34
															X				35
															X				36
X	X									1				X					37
																			38
							1		1										39
																			40

<sup>a</sup> Work reported. Detailed information not available.

<sup>b</sup> School nurses.

<sup>c</sup> Chiefly employed in regulation and improvement of boarding homes for children.

<sup>d</sup> Association supports a mothers' training school.

TABLE 1.—*Infant-welfare work by municipal and private agencies in cities*

(Sign (X) signifies that some work is

State and city.		Agency.	Infant-welfare stations.								
			Num-ber.		Infants under 1 year cared for previous year.	Doctors on staff.	Nurses.				
			Summer.	Winter.			Sum-mer.		Win-ter.		
							Full time.	Part time.	Full time.	Part time.	
WASHINGTON—contd.											
1	Spokane.....	Municipal.....									
2		Social Service Bureau, 415 Lindelle Bldg.									
3	Tacoma.....	Municipal.....									
4	Walla Walla.....	do.....									
WEST VIRGINIA.											
5	Bluefield.....	Municipal.....									
6	Charleston.....	do.....									
7	Huntington.....	do.....									
8	Martinsburg.....	do.....									
9	Parkersburg.....	do.*.....									
10	Wheeling.....	do.....									
WISCONSIN.											
11	Appleton.....	Municipal.....									
12	Ashland.....	do.....									
13	Beloit.....	do.....									
14		Beloit Visiting Nurse Assn., 1400 Fourth St.									
15	Eau Claire.....	Municipal.....									
16		Eau Claire Visiting Nurse Assn., 308½ S. Barstow St.									
17	Fond du Lac.....	Municipal.....									
18	Green Bay.....	do.....									
19	Janesville.....	do.....									
20		Civic League.....									
21	Kenosha.....	Municipal.....									
22	La Crosse.....	do.....									
23		Associated Charities of La Crosse, Courthouse.									
24	Madison.....	Municipal.....									
25		Visiting Nurse Assn., 322 S. Hamilton St.									
26	Manitowoc.....	Municipal.....									
27	Marinette.....	do.....									
28	Milwaukee.....	Municipal (child welfare division).....	7	4	2,220	25	15		15		
29		Infant Home and Hospital <sup>1</sup> .....									
30		Milwaukee Maternity Hospital and Free Dispensary Assn., 1529 Grand Ave.									
31	Oshkosh.....	Municipal.....									
32		Visiting Nurse Assn., 81 Main St.									
33	Racine.....	Municipal.....									
34	Sheboygan.....	do.....									
35		Associated Charities, 721 Ontario Ave.									
36		Woman's Club, civics committee <sup>1</sup> .....									
37		Visiting Nurse Assn.....									
38	Superior.....	Municipal.....									
39	Wausau.....	do.....									
WYOMING.											
40	Cheyenne.....	Municipal <sup>2</sup> .....									

\* Work reported. Detailed information not available.

\* Nurse partly supported by private organizations. Names of organizations not supplied.

\* No information supplied.

and towns having a population in 1910 of 10,000 and over, 1915—Continued.

being done in the field designated.]

Infant-welfare stations—Continued.						Instruction in infant hygiene in homes by nurses not connected with infant-welfare stations—Number of nurses.				Prenatal work.		Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	City inspection of milk supply.		
Instruction given to mothers.				Milk dispensed.		Summer.		Winter.		Nurses.						Supporting an obstetrical clinic.
By conferences of doctors, mothers, and nurses.	In their own homes by nurses.	By classes and clubs.	By pamphlets, circulars, etc.	Whole.	Modified.	Full time.	Part time.	Full time.	Part time.	Full time.	Part time.					
							1		1		1					1
							1		1							2
																3
																4
																5
																6
							1		1							7
																8
																9
																10
																11
																12
						1	1	1	2							13
							1		1		1					14
																15
																16
							1		1							17
																18
							1		1							19
							(1)		(1)							20
																21
						3			3							22
																23
							1		1		1					24
																25
																26
X	X	X	X	X	X					2		X	X	X	X	27
						(1)	(1)	(1)	(1)	1		X	X	X	X	28
																29
																30
																31
							1		1		1					32
																33
						1		1			1					34
																35
																36
							1		1		1					37
																38
																39
																40

<sup>4</sup> 4 school nurses in addition.

<sup>5</sup> School nurse.

TABLE 2.—*Examples of infant-welfare work in cities and towns having a population in 1910 of less than 10,000, 1915.*

State and city.	Agency.	Infant-welfare stations.		Instruction in homes— Number of nurses.		Prenatal work by nurses, part time.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.
		Num- ber.	Nurses.	Full time.	Part time.			
Alabama:								
Clanton.....	Chilton County Health Committee <sup>1</sup> .....					1	1	×
Arizona:								
Jerome.....	Yavapai County nurse <sup>2</sup> .....					1	1	
California:								
Monrovia.....	Visiting Nurse Assn.....						1	1
Connecticut:								
Branford.....	Branford Visiting Nurse Assn.....						1	
Canaan.....	North Canaan Visiting Nurse Assn. <sup>3</sup> .....						1	1
Lime Rock <sup>4</sup> .....	Lime Rock and Falls Village Visiting Nurses Assn.....						1	1
Litchfield.....	District Nursing Assn. <sup>5</sup> .....	1	1		1			×
Rockville.....	Rockville Visiting Nurse Assn., 42 Elm St.....						1	×
Florida:								
Miami.....	Woman's Relief Assn., 218 Twelfth St.....						1	1
Georgia:								
La Grange.....	La Grange Settlement.....						1	<sup>6</sup> 1
Illinois:								
Kewanee.....	Civic Nurse Board of Kewanee Woman's Club.....	1	1		1			1
Ottawa.....	Ottawa Public Health nursing organi- zation. <sup>7</sup> .....						1	1
Winnetka.....	Relief and Aid Society of Winnetka.....						1	1
Kentucky:								
Benham.....	Y. M. C. A.....					1		1
Fulton.....	Wisconsin Steel Co.....						1	
Hazard.....	City Health and Welfare League <sup>1</sup> .....						1	1
Maysville.....	Perry County Nursing Assn. <sup>2</sup> .....						1	1
Mason County Public Health League <sup>3</sup> .....	Mason County Public Health League <sup>3</sup> .....						1	1
Pine Mountain..	Pine Mountain Settlement School.....						1	1
Maine:								
Kennebunk.....	Kennebunk Visiting Nurse Assn.....						2	2
Rumford.....	Rumford District Nursing Assn., Bank Bldg.....						3	
Maryland:								
Cambridge.....	Cambridge Visiting Nurse Assn. <sup>4</sup> .....						1	1
Massachusetts:								
Danvers.....	Danvers Visiting Nurse Assn., post- office box 144.....						( <sup>6</sup> )	( <sup>6</sup> )
Great Barrington.	Visiting Nurse Assn.....	<sup>6</sup> 1	<sup>6</sup> 1		2			2
Hamilton and Wenham.....	Visiting Nurse Committee of Hamilton and Wenham, post-office Union St., Hamilton.....						1	1
Holden.....	Holden Visiting Nurse Assn., post- office box 107.....						1	1
Lancaster.....	Lancaster Social Service Assn.....						1	1
Leicester.....	Leicester Samaritan Assn., post-office box 45.....					1		1
Manchester.....	Visiting Nurse Assn. <sup>5</sup> .....						1	
Medfield and Dover.....	Visiting Nurse Assn. of Medfield and Dover, post-office box 7, Medfield.....						1	1
Middleboro.....	Middleboro District Nursing Assn.....						1	1
Milton.....	Milton Visiting Nurse Assn.....						1	1
Needham.....	Visiting Nurse Assn., 101 Pickering St.....						1	1
Norwood.....	Norwood Civic Assn., 840 Washington St.....						<sup>7</sup> 2	
Pepperell.....	Pepperell District Nurse Assn.....						<sup>6</sup> 1	
Rockland.....	Rockland Visiting Nurse Assn., 65 Vernon St.....						1	
Stoughton.....	District Nurse Assn.....						1	

<sup>1</sup> By nurses not connected with infant-welfare stations.<sup>2</sup> Affiliated with American Red Cross Town and Country Nursing Service.<sup>3</sup> Nurse's district consists of 2 small villages and surrounding farms.<sup>4</sup> Additional help by students in training in general hospital.<sup>5</sup> Work reported. Detailed information not available.<sup>6</sup> Baby-feeding clinic.<sup>7</sup> 1 additional nurse in summer.



TABLE 2.—*Examples of infant-welfare work in cities and towns having a population in 1910 of less than 10,000, 1915—Continued.*

State and city.	Agency.	Infant-welfare stations.		Instruction in homes <sup>1</sup> —Number of nurses.				Prenatal work by nurses, part time.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	
		Number.	Nurses.								
				Summer.	Winter.	Full time.	Part time.				
<b>Massachusetts—Con.</b>											
Swampscott.....	Swampscott Visiting Nurse Assn., 6 New Ocean St.	.....	.....	.....	.....	.....	.....	1	1	×	×
Walpole.....	Walpole Visiting Nurse Assn., post-office box 207.	.....	.....	.....	.....	.....	.....	1	1	.....	.....
Winchendon....	District Nurse Committee of the Winchendon Woman's Club, 142 Pleasant St.	.....	.....	.....	.....	.....	.....	2	1	.....	.....
<b>Michigan:</b>											
Grosse Pointe Farms.	Mutual Aid and Neighborhood Club, <sup>2</sup> 60 Oak St.	1	1	.....	1	.....	.....	1	.....	.....	.....
Iron Mountain..	Pewabic Visiting Nurse, 406 West E St.	.....	.....	.....	.....	.....	.....	1	1	.....	×
<b>Minnesota:</b>											
Faribault.....	Visiting Nurse Assn. <sup>4</sup> .....	.....	.....	.....	.....	.....	.....	1	1	×	×
Hibbing.....	Municipal.....	.....	.....	.....	.....	.....	.....	1	1	.....	.....
Red Wing.....	Visiting Nurse Assn., 986 Central Ave.	.....	.....	.....	.....	.....	.....	1	1	.....	×
Rochester.....	Civic League, 406 S. Broadway.....	.....	.....	.....	.....	.....	.....	1	1	.....	×
<b>New Hampshire:</b>											
Lebanon.....	Lebanon Visiting Nurse Assn., 31 High St.	.....	.....	.....	.....	.....	.....	1	1	.....	×
Lisbon.....	Lisbon District Nursing Assn.	.....	.....	.....	.....	.....	.....	1	.....	.....	.....
<b>New Jersey:</b>											
Bernardsville...	Visiting Nurse Assn. of Somerset Hills <sup>5</sup>	.....	.....	.....	.....	.....	.....	2	2	.....	×
Dover.....	Woman's Civic Club, 5 Elizabeth St.	.....	.....	.....	.....	.....	.....	1	.....	.....	.....
Englewood.....	Babies Dispensary of Englewood Hospital, 22 Van Brunt St.	1	1	1	.....	.....	.....	1	1	.....	×
	Visiting Nurse Assn. of the Presbyterian Church, 41 E. Englewood Ave.	.....	.....	.....	.....	.....	.....	1	1	.....	×
Franklin.....	Neighborhood House <sup>6</sup>	1	1	.....	.....	.....	.....	1	.....	.....	×
Madison.....	Town Improvement Settlement House, 36 Main St.	1	1	(7)	(7)	.....	.....	(7)	×	×	×
Mount Holly....	Woman's League, 49 Grant St.....	.....	.....	.....	.....	.....	.....	1	1	.....	×
<b>New York:</b>											
Northern Westchester County territory divided into the following districts—											
Mount Kisco, Bedford Hills, Bedford, Pound Ridge, Middle Patent.	District Nursing Assn. of Northern Westchester County. <sup>8</sup>	.....	.....	.....	.....	.....	.....	1	1	.....	×
Katonah, Goldenbridge, North Salem, Purdys Station, Croton Falls, Somers, Somers Center, South Salem, Cross River, Lake Waccabuc, Lewisboro, Lincolndale.	.....do.....	.....	.....	.....	.....	.....	.....	1	1	.....	×

<sup>1</sup> By nurses not connected with infant-welfare stations.<sup>2</sup> Additional nurse in summer.<sup>3</sup> Affiliated with American Red Cross Town and Country Nursing Service.<sup>4</sup> Work reported. Detailed information not available.<sup>5</sup> Rural area, comprising several small villages in a diameter of about 10 miles.<sup>6</sup> Weekly conference between mothers and nurses; babies weighed; mothers instructed.<sup>7</sup> Number not supplied.<sup>8</sup> Secretary of District Nursing Assn. of Northern Westchester County, Miss Della W. Marble, Bedford.

TABLE 2.—*Examples of infant-welfare work in cities and towns having a population in 1910 of less than 10,000, 1915—Continued.*

State and city.	Agency.	Infant-welfare stations.		Instruction in homes <sup>1</sup> — Number of nurses.		Prenatal work by nurses, part time.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.
		Num-ber.	Nurses.	Number of nurses.				
					Summer.	Winter.	Full time.	
New York—Contd.								
Northern Westchester County, etc.—Con.								
Pleasantville, Briar Cliff, Briar Cliff Manor, and Sherman Park north of the bridge.	District Nursing Assn. of Northern Westchester County.					1	1	X
Yorktown Heights, Amawalk, Kitchawan, Elmsford, Eastview, West Somers, Baldwin Place.	.....do.....					1	1	X
Chappaqua, Millwood, Hawthorne, Valhalla, Kensico, and Sherman Park south of the bridge.	.....do.....					1	1	X
Cortlandt district includes the villages of Crugers, Montrose, Buchanan, Mohegan, Crum Pond, Verplanck, Oscawana, Oregon, Furnace Woods.	.....do.....					1	1	X
Ossining, Sparta, and Scarborough	.....do.....					1	1	X
Brewster.....	District Nursing Assn. of Southeast.....					1		X
Canandaigua.....	Canandaigua Health Assn., 28 Hallenbeck Bldg.					2	2	X
Dobbs Ferry, Irvington, and Ardsley.	Welfare Assn., Inc., 442 Broadway, Dobbs Ferry.					1	1	X
Harrison.....	Harrison District Nursing Assn.....					1	1	
Hastings upon Hudson.	Infant-welfare station <sup>2</sup> .....	1		1				X
Herkimer.....	Municipal.....	1		1			1	X
Islip town.....	Islip Town Chapter of the American Red Cross Town and Country Nursing Service.					1		
Purchase.....	Purchase Visiting Nurse Assn. <sup>3</sup> .....					1	1	X
Rhinebeck.....	Thompson House district nurse.....					1		
Roslyn.....	Roslyn District Nursing Assn., Roslyn Heights.					1	1	
Seneca Falls....	Infant-Welfare Assn. <sup>4</sup> .....	1	1	1	1		1	X
Tarrytown and North Tarrytown.	Woman's Civic League of Tarrytown and North Tarrytown, 127 Wildey St.					1	1	X
Wappingers Falls.	Municipal.....	1			1			X

<sup>1</sup> By nurses not connected with infant-welfare stations.<sup>2</sup> Maintained by private funds. In charge of health officer.<sup>3</sup> Affiliated with American Red Cross Town and Country Nursing Service.<sup>4</sup> Supported by public funds and private contributions.

TABLE 2.—*Examples of infant-welfare work in cities and towns having a population in 1910 of less than 10,000, 1915—Continued.*

State and city.	Agency.	Infant-welfare stations.		Instruction in homes— Number of nurses.		Prenatal work by nurses, parttime.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.
		Number.	Nurses.	Fulltime.	Parttime.			
North Carolina:								
Altapass.....	Holman Association.....					1	1	×
Goldsboro.....	Goldsboro Benevolent Society.....					1	1	×
Newbern.....	Anti-Tuberculosis Society, <sup>2</sup> 90 Craven St.					1	1	×
Whiterock.....	Presbyterian Board of Foreign Mis-sions. <sup>2</sup>					1	1	×
Ohio:								
Circleville.....	Circleville Benevolent Assn., 114 W. Franklin St.					1	1	×
Cuyahoga Falls.....	Visiting Nurse Committee <sup>2</sup> .....					1	1	×
Fremont.....	Woman's Federation of Fremont.....					1	1	×
Pennsylvania:								
Darby.....	Visiting Nurse Fund for Darby and Vicinity, 117 Chestnut St.					1	1	×
Gettysburg.....	Visiting Nurse Assn., 54 E. Middle St.					1	1	×
Haverford.....	Main Line Citizens Assn. (main line Pennsylvania R. R. from Radnor to Overbrook). <sup>2</sup>					2	2	×
Huntsdale.....	Huntsdale Visiting Nurse Assn. <sup>2</sup> .....					1	1	×
Kingston.....	West Side Visiting Nurse Assn., 470 Market St.					1	1	×
Muncy.....	Muncy Visiting Nurse Assn., 32 Green St.					1	1	×
Palmerton.....	New Jersey Zinc Co. <sup>2</sup> (of Pennsyl-vania).					1	1	×
Wayne.....	The Neighborhood League (main line Pennsylvania R. R. from Radnor to Paoli), <sup>2</sup> Wayne Coffee House.					1	1	×
Rhode Island:								
Bristol.....	Bristol Fortnightly Club, 631 Hope St.					1	1	×
East Greenwich.....	Visiting Nurse Assn. and Anti-Tuber-culosis Assn., 8, Main St.					1	1	×
North Kings-town.....	Visiting Nurse and Anti-Tuberculosis Assn. of North Kingstown and Wick-ford (post office, Wickford).					1	1	×
Pascoag.....	Burrillville Anti-Tuberculosis Assn.....					1	1	×
Warren.....	Warren District Nursing Assn., 7 Lyn-den St.					1	1	×
Vermont:								
Brattleboro.....	Brattleboro Mutual Aid Assn., 1 Canal St.					1	1	×
Montpelier.....	Montpelier Woman's Club, 138 State St.					1	1	×
Proctor.....	Proctor Hospital (Vermont Marble Co.).					3	( <sup>3</sup> )	×
Springfield.....	Golden Rule Circle of King's Daughters, 140 Summer St.					1	1	×
Windsor.....	Visiting Nurse Assn., Windsor St.					1	1	×
Virginia:								
Charlottesville.....	Charlottesville Public Health and Nurse Assn., post-office box 36.					1	1	×
Hot Springs.....	Hot Springs Valley Nursing Assn., <sup>2</sup> post-office box 284.					1	1	×
Leesburg.....	Lena Morton Memorial nurse.....					1	1	×
Lexington.....	Civic League district nurse.....					1	1	×
Warrenton.....	Warrenton District Nurse Assn. <sup>2</sup> .....					1	1	×
Winchester.....	District Nurse Assn., Farmers and Merchants Bank Bldg.					1	1	×

<sup>1</sup> By nurses not connected with infant-welfare stations.<sup>2</sup> Affiliated with American Red Cross Town and Country Nursing Service.<sup>3</sup> Nurse works in a rural district covering about 50 square miles; work done in cooperation with American Red Cross Town and Country Nursing Service.<sup>4</sup> Part of Philadelphia Visiting Nurse Assn. Affiliated with American Red Cross Town and Country Nursing Service.<sup>5</sup> Mainly rural work.<sup>6</sup> Limited.

TABLE 2.—*Examples of infant-welfare work in cities and towns having a population in 1910 of less than 10,000, 1915—Continued.*

State and city.	Agency.	Infant-welfare stations.		Instruction in homes <sup>1</sup> — Number of nurses.		Prenatal work by nurses, part time.	Little Mothers' Leagues or classes.	Work by nurses to prevent infant blindness.	
		Num-ber.	Nurses.	Number of nurses.					
Summer.	Winter.	Full time.	Part time.	Full time.	Part time.				
Washington: Mount Vernon..	Skagit County public health nurse, post-office box 583.	.....	.....	.....	.....	1	.....	×	.....
West Virginia: Clarksburg.....	Civic Club of Clarksburg, 363 Mechanic St.	.....	.....	.....	.....	( <sup>2</sup> )	( <sup>2</sup> )	.....	.....
Moundsville.....	Reynolds Memorial Hospital, social-service department, Third St.	.....	.....	.....	.....	1	1	.....	×
Wisconsin: Neenah and Menasha.	Visiting Nurse Assn. of Neenah and Menasha.	.....	.....	.....	.....	1	<sup>2</sup> 2	×	.....
Rhineland.....	Visiting Nurse Assn.....	.....	.....	.....	.....	1	1	.....	×
Two Rivers.....	Ladies Charitable Assn., High School Bldg.	.....	.....	.....	.....	1	1	×	×

<sup>1</sup> By nurses not connected with infant-welfare stations.<sup>2</sup> Number not supplied.<sup>3</sup> A Metropolitan Insurance nurse aids in this work.<sup>4</sup> Organized by school nurse.TABLE 3.—*Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915.*

State and city.	Population, 1910.	Country milk inspection.	Dairy farms.		Stores selling milk scored.	Bacteriological standards enforced.	Pasteurization ordinance.
			Scored.	Scored by card employed by Department of Agriculture.			
Alabama: Birmingham.....	132,685	×	×	×	.....	×	.....
Mobile.....	51,521	×	×	<sup>1</sup> ×	×	×	.....
Arizona: Phoenix.....	11,134	×	×	.....	×	.....	.....
Tucson.....	13,193	×	.....	.....	×	×	.....
Arkansas: Little Rock.....	45,941	×	×	×	<sup>2</sup> ×	×	.....
California: Berkeley.....	40,434	×	×	×	×	×	×
Eureka.....	11,845	.....	.....	.....	.....	×	.....
Fresno.....	24,882	×	.....	.....	.....	×	.....
Long Beach.....	17,809	×	×	×	×	×	.....
Los Angeles.....	319,198	×	×	<sup>1</sup> ×	.....	( <sup>3</sup> )	.....
Oakland.....	150,174	×	×	.....	×	×	.....
Pasadena.....	30,291	×	.....	.....	.....	.....	.....
Pomona.....	10,207	×	×	.....	×	.....	.....
Redlands.....	10,449	×	×	.....	×	×	.....
Riverside.....	15,212	×	×	×	.....	.....	.....
Sacramento.....	44,696	.....	.....	.....	×	×	.....
San Bernardino.....	12,779	×	×	.....	×	.....	.....
San Francisco.....	416,812	×	×	.....	×	.....	×
San Jose.....	28,946	×	×	×	.....	.....	.....
Santa Barbara.....	11,659	×	×	.....	.....	.....	.....
Stockton.....	23,253	×	.....	.....	×	.....	.....
Colorado: Colorado Springs.....	29,078	×	×	×	.....	.....	.....
Denver.....	213,381	×	×	.....	×	.....	.....
Fueblo.....	44,395	×	×	.....	×	×	.....
Trinidad.....	10,204	.....	×	<sup>1</sup> ×	×	.....	.....

<sup>1</sup> Modification of Department of Agriculture card.<sup>2</sup> Milk depots, but not grocery and other stores.<sup>3</sup> Notify dairy when over 500,000.<sup>4</sup> Partial only.

TABLE 3.—Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915—Continued.

State and city.	Popula- tion, 1910.	Country milk inspec- tion.	Dairy farms.		Stores selling milk scored.	Bacterio- logical standards enforced.	Pasteur- ization ordina- nce.
			Scored.	Scored by card employed by De- partment of Agri- culture.			
<b>Connecticut:</b>							
Bridgeport.....	102,054	x	x	x			
Greenwich.....	16,463	x	x		x		x
Hartford.....	98,915	x	x	x			
Meriden.....	32,066	x				x	
New Haven.....	133,605	x	x				
New London.....	19,659	x	x	<sup>1</sup> x		x	
Norwalk.....	24,211					x	
Orange.....	11,272					x	
Stamford town.....	28,836	x	x			x	x
Waterbury.....	73,141	x				x	
<b>Delaware:</b>							
Wilmington <sup>2</sup> .....	87,411						
<b>District of Columbia:</b>							
Washington.....	331,069	x	x		x		
<b>Florida:</b>							
Jacksonville.....	57,699	x	x	x		x	
Tampa.....	37,782	x	x	<sup>1</sup> x		x	
<b>Georgia:</b>							
Augusta.....	41,040	x	x			x	
Brunswick.....	10,182	x	x		x	x	
Rome.....	12,099	x				x	
Waycross.....	14,485		x	x		x	
<b>Illinois:</b>							
Alton.....	17,528	x				x	
Belleville.....	21,122					x	
Cairo.....	14,548	x			x	x	
Chicago.....	2,185,283	x	x	x	x	x	x
Danville.....	27,871	x					
Elgin <sup>3</sup> .....	25,976						
La Salle, Peru, and Oglesby.....	<sup>(4)</sup>	x	x		x	x	
Moline.....	24,199	x	x			x	
Rockford.....	45,401		x			x	
Springfield.....	51,678		<sup>5</sup> x			x	
Waukegan.....	16,069	x	x		x	x	
<b>Indiana:</b>							
Anderson.....	22,476	x	x				x
East Chicago.....	19,098	x	x	x	x	x	
Fort Wayne.....	63,433	x	x	x	x	x	
Gary.....	16,402	x	x			x	
Indianapolis.....	233,450	x	x		x	x	
Kokomo.....	17,010	x	x				
Logansport.....	19,450		x				
Marion.....	19,459		x	x			
Muncie.....	24,005	x					
Richmond.....	22,424		x				
Terre Haute.....	58,157	x	x	x	x	x	
<b>Iowa:</b>							
Cedar Rapids.....	32,811	x	x	x			
Clinton.....	25,577	x	x	x			x
Davenport.....	43,028		x				
Des Moines.....	86,368		x	x	x	x	
Mason City.....	11,230		x	x			
Sioux City.....	47,828	x	x	x	x		
Waterloo.....	26,693	x	x	x			
<b>Kansas:</b>							
Coffeyville.....	12,687	x					
Fort Scott <sup>2</sup> .....	10,463						
Hutchinson <sup>2</sup> .....	16,364						
Kansas City.....	82,331	x	x	x	x		
Topeka.....	43,684	x	x	x	x	x	

<sup>1</sup> Modified.<sup>2</sup> Limited. Details not supplied.<sup>3</sup> Not rigidly.<sup>4</sup> Population of La Salle, 11,537; of Peru, 7,984; population of Oglesby not given by Census Bureau.<sup>5</sup> State board of health.

TABLE 3.—Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915—Continued.

State and city.	Popula- tion, 1910.	Country milk inspec- tion.	Dairy farms.		Stores selling milk scored.	Bacterio- logical standards enforced.	Pasteur- ization ordi- nance.
			Scored.	Scored by card employed by De- partment of Agri- culture.			
<b>Kentucky:</b>							
Henderson.....	11,452	x	x		x	x	
Lexington.....	35,099	x	x	x		x	
Louisville.....	223,928	x	x	x	x		
Newport.....	30,309	x	x	x			
Paducah.....	22,760	x	x	x			
<b>Louisiana:</b>							
Lake Charles.....	11,449	x	x	x			
New Orleans.....	339,075				x		
Shreveport.....	28,015	x	x	x	x	x	
<b>Maine:</b>							
Portland.....	58,571					x	
<b>Maryland:</b>							
Baltimore.....	558,485	x	x	x	x	x	
Cumberland.....	21,839		x	x			x
Hagerstown.....	16,507	x				x	
<b>Massachusetts:</b>							
Arlington.....	11,187	x	x	x	x		
Attleboro.....	16,215	x	x	x	x		
Boston.....	670,385	x	x	x	x		
Brockton.....	56,878	x	x	x	x		
Brookline.....	27,792	x	x				
Cambridge.....	104,839						
Chelsea.....	32,452	x	x	x			
Clinton.....	13,075	x	x	x			
Everett <sup>1</sup> .....	33,484						
Fall River.....	119,295	x	x	x	x		
Fitchburg.....	37,826						
Frammingham.....	12,948	x	x	x			
Gardner.....	14,099	x	x	x			
Gloucester.....	24,398	x	x	x			
Greenfield.....	10,427		x	x			
Haverhill.....	44,115	x					
Holyoke.....	57,730		x	x			
Lowell.....	106,294						
Lynn.....	89,336	x					
Malden.....	44,404	x					
Melrose.....	15,715	x					
New Bedford.....	96,652		x	x			
Newburyport.....	14,949	x					
Newton.....	39,806		x	x			
North Adams.....	22,019	x	x	x			
Northampton <sup>2</sup> .....	19,431						
Pittsfield.....	32,121	x					
Salem.....	43,097	x	x	x			x
Somerville.....	77,236	x	x	x			
Southbridge.....	12,592	x	x	x			
Springfield.....	88,926	x	x	x			
Taunton.....	34,259	x	x	x			
Wakefield.....	11,404	x	x	x			
Waltham.....	27,834	x	x	x			
Westfield.....	16,044	x	x	x			
Winthrop.....	10,132						x
Worcester.....	145,986	x	x	x			
<b>Michigan:</b>							
Alpena.....	12,706	x					
Ann Arbor.....	14,817	x					
Battle Creek.....	25,267	x					
Bay City.....	45,166	x					
Detroit.....	465,766	x	x	x			x
Flint.....	38,450	x	x	x			
Grand Rapids.....	112,571	x	x	x	x		
Ironwood.....	12,821	x					
Jackson.....	31,433						
Kalamazoo.....	39,437	x	x	x	x		
Lansing.....	31,229	x	x				
Manistee.....	12,381	x					

<sup>1</sup> Irregularly.<sup>2</sup> With additions.<sup>3</sup> Limited. Details not supplied.<sup>4</sup> Modified.

TABLE 3.—Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915—Continued.

State and city.	Popula- tion, 1910.	Country milk inspec- tion.	Dairy farms.		Stores selling milk scored.	Bacterio- logical standards enforced.	Pasteur- ization ordina- nce.
			Scored.	Scored by card employed by De- partment of Agri- culture.			
<b>Michigan—Continued.</b>							
Marquette.....	11,503	x	x	x	x	x	.....
Menominee.....	10,507	x	x	x	.....	.....	.....
Pontiac.....	14,532	.....	x	.....	.....	.....	.....
Saginaw.....	50,510	x	x	.....	x	x	.....
Sault Ste. Marie <sup>1</sup> .....	12,615	.....	.....	.....	.....	.....	.....
<b>Minnesota:</b>							
Duluth.....	78,466	x	x	x	.....	x	.....
St. Paul.....	214,744	x	x	x	.....	x	.....
<b>Mississippi:</b>							
Jackson.....	21,262	x	x	x	.....	x	.....
<b>Missouri:</b>							
Hannibal.....	18,341	x	x	x	x	x	x
Joplin.....	32,073	x	.....	.....	.....	.....	.....
Kansas City.....	248,381	x	x	x	x	x	.....
St. Joseph.....	77,403	x	x	.....	.....	.....	x
St. Louis.....	687,029	x	x	x	<sup>2</sup> x	x	x
<b>Montana:</b>							
Billings.....	10,031	.....	x	.....	x	.....	.....
Butte.....	39,165	x	x	.....	x	.....	.....
Missoula.....	12,869	x	x	x	x	.....	.....
<b>Nebraska:</b>							
Lincoln.....	43,973	x	x	.....	x	x	x
Omaha.....	124,096	.....	.....	x	.....	.....	x
<b>Nevada:</b>							
Reno.....	10,867	.....	x	x	.....	x	.....
<b>New Hampshire:</b>							
Berlin.....	11,780	x	x	x	.....	x	.....
Concord.....	21,497	x	x	x	.....	x	.....
Manchester.....	70,063	x	x	.....	x	x	.....
Nashua.....	26,005	x	x	.....	x	.....	.....
<b>New Jersey:</b>							
Asbury Park.....	10,150	x	x	x	.....	.....	.....
Bloomfield.....	15,070	<sup>3</sup> x	x	.....	.....	.....	.....
East Orange <sup>4</sup> .....	34,371	.....	.....	.....	.....	.....	.....
Hackensack.....	14,050	.....	x	.....	.....	.....	.....
Jersey City.....	267,779	x	x	x	x	.....	.....
Kearny.....	18,659	.....	x	.....	.....	x	x
Long Branch.....	13,298	x	x	x	.....	x	x
Montclair.....	21,550	x	x	x	x	x	x
Morristown.....	12,507	x	.....	.....	.....	x	.....
Newark.....	347,469	.....	x	x	( <sup>5</sup> )	x	x
Orange <sup>6</sup> .....	29,630	x	x	x	( <sup>7</sup> )	x	x
Passaic.....	54,773	x	x	x	x	.....	.....
Plainfield.....	20,550	x	x	x	.....	x	x
Trenton.....	96,815	x	x	.....	.....	x	.....
West Hoboken <sup>8</sup> .....	35,403	.....	.....	.....	.....	.....	.....
West Orange <sup>4</sup> .....	10,980	.....	.....	.....	.....	.....	.....
West New York.....	13,560	.....	.....	.....	x	.....	x
<b>New Mexico:</b>							
Albuquerque.....	11,020	.....	x	.....	.....	x	.....
<b>New York:</b>							
Albany.....	100,253	x	x	x	.....	x	x
Amsterdam.....	31,267	x	x	x	x	x	x
Buffalo.....	423,715	x	x	.....	x	x	.....
Cohoes.....	24,709	x	x	.....	.....	x	.....
Corning.....	13,730	x	x	.....	x	x	x
Cortland.....	11,504	x	x	.....	.....	.....	.....
Dunkirk.....	17,221	x	x	x	.....	x	.....
Glens Falls.....	15,243	x	x	.....	x	x	.....
Hudson.....	11,417	.....	x	x	.....	.....	.....
Ithaca.....	14,802	x	x	x	.....	x	.....
Kingston.....	25,908	x	x	.....	x	x	.....
Little Falls.....	12,273	x	x	.....	x	.....	.....

<sup>1</sup> Limited. Details not supplied.<sup>2</sup> Where 10 or more gallons are sold.<sup>3</sup> Limited.<sup>4</sup> See Orange.<sup>5</sup> Inspect and grant permits.<sup>6</sup> Milk inspection for the Oranges all under one system.<sup>7</sup> Make regular bimonthly inspections.

TABLE 3.—Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915—Continued.

State and city.	Popula- tion, 1910.	Country milk inspec- tion.	Dairy farms.		Stores selling milk scored.	Bacterio- logical standards enforced.	Pasteur- ization ordi- nance.
			Scored.	Scored by card employed by De- partment of Agri- culture.			
New York—Continued.							
Mount Vernon.....	30,919			x			
New Rochelle.....	28,967			x	x	x	
New York.....	4,766,883	x	x		x	x	x
Newburgh.....	27,405	x	x		x	x	
North Tonawanda.....	11,955	x	x		x	x	
Olean.....	14,743	x	x		x	x	
Ossining.....	11,480	x	x		x	x	
Oswego.....	23,368	x	x				
Plattsburg.....	11,138	x	x	x			
Poughkeepsie.....	27,036	x			x	x	
Rensselaer.....	10,711		x				
Rochester.....	218,149	x	x		x	x	x
Saratoga Springs.....	12,993	x	x		x	x	
Schenectady.....	72,826	x	x	x	x	x	x
Syracuse.....	137,249	x	x	1 x	x	x	x
Troy.....	76,813	x	x	x		x	
Watertown.....	26,730	x	x		x		
White Plains.....	15,949			x		x	
Yonkers.....	79,403	x	x			x	
North Carolina:							
Charlotte.....	34,014	x	x	x	x	x	x
Durham.....	18,241	x					
Greensboro.....	15,895	x	x				
Wilmington.....	25,748	x	x	x		x	
North Dakota:							
Fargo.....	14,331	x	x	x		x	
Ohio:							
Akron.....	69,067	x	x			x	
Canton.....	50,217	x	x	x			
Cincinnati.....	363,991	x	x		x	x	x
Cleveland.....	560,963	x	x	x	x	x	
Columbus.....	181,511	x	x		x	x	
Dayton.....	116,577	x	x	x	x	x	
East Liverpool.....	20,387						
Elyria.....	14,825	x	x	x		x	
Hamilton.....	35,279				x	x	
Ironton.....	13,147	x					
Lakewood.....	15,181	x					
Lorain.....	28,883		x	x	x	x	
Mansfield.....	20,768	x	x				
Middletown.....	13,152	x	x	x			
Newark.....	25,404	x					
Piqua.....	13,388		x	x			
Portsmouth.....	23,481	x	x				
Sandusky.....	19,089			x			
Springfield.....	46,921	x	x				
Toledo.....	168,497	x	x	x		x	
Warren.....	11,081		x				
Zanesville.....	28,026	x				x	
Oklahoma:							
McAlester.....	12,954	x					
Oklahoma City.....	64,205	x	x	x	x	x	
Tulsa.....	18,182						
Oregon:							
Portland.....	207,214	x	x	x		x	x
Pennsylvania:							
Altoona.....	52,127	x	x	x			x
Connellsville.....	12,845					x	
Erie.....	66,525	x	x	2 x	x	x	
Harrisburg.....	64,186	x				x	
Lancaster.....	47,227	x				x	
Lebanon.....	19,240	x					
Meadville.....	12,780	x	x	x	x	x	
Nanticoke.....	18,877	x	x			x	
New Castle *.....	36,280						
Philadelphia.....	1,549,008		x		x	x	x
Pittsburgh.....	533,905	x	x				

1 Revised.

2 Modified.

\* Work limited; by volunteer inspectors.



TABLE 3.—Milk inspection in certain cities and towns having a population in 1910 of 10,000 and over, 1915—Continued.

State and city.	Popula- tion, 1910.	Country milk inspec- tion.	Dairy farms.		Stores selling milk scored.	Bacterio- logical standards enforced.	Pasteur- ization ordina- nce.
			Scored.	Scored by card employed by De- partment of Agri- culture.			
Pennsylvania—Continued.							
Reading.....	96,071	×	×				
Scranton.....	129,867	×	×				
Warren.....	11,080	×				×	
Rhode Island:							
Central Falls.....	22,754	×	×	×	×	×	
East Providence.....	15,808	×	×		×		
Newport.....	27,149	×					
Tawtucket.....	51,622	×				×	
Providence.....	224,326	1 ×	1 ×	×			
Woonsocket <sup>1</sup> .....	38,125						
South Carolina:							
Greenville.....	15,741		×	×	×	×	
Tennessee:							
Chattanooga.....	44,604	1 ×	×	×		×	
Jackson.....	15,779		×	×			
Knoxville.....	36,346	×	×	×		×	
Memphis.....	131,105	×	×		×	×	
Nashville.....	110,364	×	×	×	×	×	
Texas:							
Austin.....	29,860	×	×	×			
Beaumont.....	20,640	×	×	×			
El Paso.....	39,279	×				×	
Marshall.....	11,452	×	×				
San Antonio.....	96,614			×		×	×
Texarkana <sup>2</sup> .....	16,445	×	×	×	×	×	
Utah:							
Ogden.....	25,580		×	×		×	
Salt Lake City.....	92,777	×	×	×	×	×	×
Vermont:							
Barre.....	10,734	×	×	×			
Rutland.....	13,546	×	×			×	
Virginia:							
Danville.....	19,020	×	×	×			
Lynchburg.....	29,494	×	×	×		×	
Newport News.....	20,205	×	×				
Norfolk.....	67,452	×	×	×		×	
Roanoke.....	34,874	×	×	×		×	×
Washington:							
Everett.....	24,814	×	×	×			×
North Yakima.....	14,082	×	×	×		×	×
Seattle.....	237,194	×	×	×		×	
Spokane.....	104,402	×	×	×		×	
Tacoma.....	83,743	×	×	×	×	×	
West Virginia:							
Wheeling.....	41,641	×	×	×	×	×	
Wisconsin:							
Appleton.....	16,773					×	
Ashland <sup>3</sup> .....	11,594						
Beloit.....	15,125		×	×			
Madison.....	25,531	×	×	×		×	×
Manitowoc <sup>3</sup> .....	13,027						
Milwaukee.....	373,857	×	×	×		×	
Oshkosh.....	33,062					×	
Racine.....	38,002	×	×	×			×
Sheboygan.....	26,398	×					
Wausau.....	16,560	×					×

<sup>1</sup> Limited.<sup>2</sup> Figures shown are for Texarkana, Ark., and Texarkana, Tex.<sup>3</sup> Limited. Details not supplied.

TABLE 4.—*Summary of State laws and rulings relating to the prevention of blindness from babies' sore eyes (no county or city acts, ordinances, or rulings included).*

[Based on statement published by National Committee for the Prevention of Blindness, revised to include the laws of 1915. References are to session laws unless otherwise specified.]

State.	Babies' sore eyes reportable.	Health officer empowered and required to secure attention for uncared-for cases.	Law in regard to reporting sore eyes printed on birth certificates.	Free prophylactic distributed.	Physicians and midwives required to use prophylactic.	Question on birth certificate whether or not prophylactic used.	How early and by whom births are reported.	Literature distributed by department of health.
Alabama.....							By physician or midwife, within the first days (sic) of each month. Code 1907, s. 711, as amended 1911, p. 117.	
Arizona.....							5 days, by physician, midwife, parent, or other person. Rev. Stat. 1913, s. 4417.	
Arkansas.....	By midwife, nurse, or other person having charge.						10 days, by physician, midwife, parent, or other person. Rules of State board of health, 1913.	
California.....	By physician or other practitioner, midwife, nurse, parent, or other person having charge.			Yes. 1915, c. 724.		Yes.....	38 hours, by physician or midwife; 10 days, by parent or other person. 1915, c. 378.	Copies of law to physicians, midwives, etc. 1915, c. 724.
Colorado.....	If no physician is in attendance, by parent, nurse, or other person in charge.	Yes. Penalty not to exceed \$300. Reg. No. 28. State board of health. (Adopted Feb. 7, 1916.)					10 days, by physician, midwife, parent, or other person. Mill's Anno. Stat. 1912, s. 448.	
Connecticut.....	By midwife, nurse, or attendant.						First week each month, by physician, midwife, etc. Gen. Stat. 1902, s. 1801, as amended 1907, c. 91.	Leaflet. Directions to mothers, midwives, and nurses.
Delaware.....							Notification within 24 hours, by physician or person present; certificate within 10 days, by physician, midwife, parent, or other person. Rev. Code 1915, s. 807.	

District of Columbia.	By midwife or attendant other than physician.	To midwives only. Report of the health officer, 1916, p. 72.	Yes. Rule No. 33. State board of health. May 13, 1914. Shall advise. Penalty \$10 to \$100. 1915, p. 366.	Yes. Burns's Anno. Stat. 1914, s. 7607b. Penalty \$10 to \$50.	Yes. Burns's Anno. Stat. 1914, s. 7607b. Penalty \$10 to \$50.	Not later than Saturday first ensuing after 3 secular days, by physician, midwife, etc. 34 U. S. Stat., p. 1010.	Pamphlet. How to Keep Your Baby Well, containing warning about sore eyes.
Florida.						10 days, by physician, midwife, parent, or other person. 1916, c. 662, s. 13.	Leaflet. Directions to mothers, midwives, and nurses.
Georgia.						10 days, by physician, midwife, parent, or other person. Anno. Code 1914, s. 1276(a).	Part of leaflet of instructions to midwives.
Idaho.	By midwife, nurse, or other person, having charge.	To physicians. State board of health. Aug. 7, 1916. 366.	Yes. Rule No. 33. State board of health. May 13, 1914. Shall advise. Penalty \$10 to \$100. 1915, p. 366.	Yes. Burns's Anno. Stat. 1914, s. 7607b. Penalty \$10 to \$50.	Yes. Burns's Anno. Stat. 1914, s. 7607b.	10 days, by physician, midwife, parent, or other person. 1911, p. 638, s. 13.	Advice and information, together with copies of the law, to physicians, midwives, and others. 1915, p. 366.
Illinois.	By physician, midwife, nurse, parent, etc.					Notification within 24 hours and certificate in 10 days, by physician, midwife, parent, or other person. 1915, p. 660.	
Indiana.	By parent or attendant.	Health officer to secure medical attention. Penalty \$10 to \$50. Burns's Anno. Stat. 1914, s. 7607a.				36 hours, by physician, midwife, etc. Burns's Anno. Stat. 1914, s. 7607b.	
Iowa.	By physician.					10 days, by physician, midwife, parent, or other person. 1911, c. 294.	Yes. Do.
Kansas.						10 days, by physician, midwife, parent, or other person. Carroll's Stat. 1915, s. 2062a, 13-14.	Yes. Carroll's Stat. 1915, s. 2062b.
Kentucky.	By physician, midwife, nurse, or parent.					Quarterly, by physician or midwife (in the State). 24 hours, by physician, midwife, parent, or other person present (in parish of Orleans). A Wolf's Constitution and Rev. Laws, 2d ed., 1904, p. 145, s. 9, and p. 178 (1900, No. 162, s. 3), as amended 1910, p. 250.	Copies of law to all physicians, midwives, etc. 1914, No. 174, p. 292.
Louisiana.	By physician, midwife, nurse, parent, or other attendant.						

<sup>1</sup> See p. 112 for details.

TABLE 4.—Summary of State laws and rulings relating to the prevention of blindness from babies' sore eyes (no county or city acts, ordinances, or rulings included)—Continued.

State.	Babies' sore eyes reportable.	Health officer empowered and required to secure attention for uncared-for cases.	Law in regard to reporting sore eyes printed on birth certificates.	Free prophylactic outfits distributed.	Physicians and midwives required to use a prophylactic.	Question on birth certificate whether or not prophylactic used.	How early and by whom births are reported.	Literature distributed by department of health.
Maine.....	By midwife, nurse, or person having charge.	Yes. Rules and regulations State board of health January, 1916.					Within 6 days, by physician, midwife, parent, etc. Rev. Stat. 1903, c. 61, ss. 19, 25 as amended 1909, c. 75, p. 83, s. 3.	Part of leaflet on care of eyes.
Maryland.....	By midwife, nurse, or other attendant than physician.						4 days, by physician, midwife, father, or other person. Anno. Code vol. 3, 1914, art. 43, ss. 14-16.	Leaflets and pamphlets on prevention of blindness.
Massachusetts...	By physician, nurse, relative, or other attendant.	Yes. Rev. Laws 1902, c. 75, s. 49 as amended 1914, c. 177.	Yes. In substance.	Yes. Annual appropriation, \$2,500, 1910, c. 458; 1911, c. 643.	Yes. Penalty not more than \$100 or 6 months, or both. 1913, p. 221, No. 123.		Notification within 48 hours by physician and midwife. 1912, c. 280, p. 189.	Leaflet giving law and directions for prevention of blindness.
Michigan.....	By midwife, nurse, or person having charge.						5 days, by physician, attendant, father, or other person. Howell's Anno. Stat. 1913, s. 1584, as amended 1915, p. 520.	Yes; with traveling exhibit.
Minnesota.....	By midwife, nurse, parent, or other person having charge.	Yes. Gen Stat. 1913, ss. 4646-4648.					10 days, by physician, midwife, or parent. Gen. Stat. 1913, s. 4651.	Copies of law to be furnished all physicians and midwives; also advice and information concerning danger and treatment to be published and sent to all physicians and midwives. 1916, p. 115.
Mississippi.....	By physician, midwife, nurse, relative, maternity home or hospital, parent, or other person in attendance.	Yes. Penalty \$50 to \$200, 1916, c. 115.		Yes. 1916, c. 115. Appropriation for carrying out provisions of act, \$200, 1915, c. 73.	Yes. Penalty \$50 to \$200, 1916, c. 115.		10 days, by physician, midwife, parent, or other person. Rule 21, regulations State board of health.	Copies of law sent to midwives and nurses. Rev. Stat. 1908, s. 8322.
Missouri.....	By midwife, nurse, or person having charge.						10 days, by physician, midwife, parent, or other person. Rev. Stat. 1906, s. 6676.	



TABLE 4.—Summary of State laws and rulings relating to the prevention of blindness from babies' sore eyes (no county or city acts, ordinances, or rulings included)—Continued.

State.	Babies' sore eyes reportable. <sup>1</sup>	Health officer empowered and required to secure attention for uncared-for cases.	Law in regard to reporting sore eyes printed on birth certificates.	Free prophylactic outfits distributed.	Physicians and midwives required to use prophylactic.	Question on birth certificate whether or not prophylactic used.	How early and by whom births are reported.	Literature distributed by department of health.
Oregon	By midwife, nurse, or other person having charge.	Furnishes directions for treatment. Penalty \$25 to \$100, not more than 30 days, or both. 1915, c. 210.				Yes	10 days, by physician, midwife, parent, or other person. 1915, c. 288, s. 12.	Copy of act to midwives or nurses. 1915, c. 210. Pamphlet containing instructions to mothers.
Pennsylvania	By physician, midwife, nurse, or other person having charge.	Must notify parents of danger. Penalty, \$20 to \$100, 10 to 30 days, or both. 1913, No. 295.					10 days, by physician, midwife, parent, or other person. 1915, No. 402.	Copies of act furnished to midwives, nurses, and health officers. 1913, No. 295.
Rhode Island	By midwife, nurse, or other person having charge.			Yes. 1914, p. 348, c. 1081.	Physicians are required. Penalty not more than \$100, or 6 months, or both. Gen. Laws, 1909, c. 343, s. 25, as amended 1914, c. 1081.		By fifth day of following month, by physician or midwife. Gen. Laws, 1909, c. 121, s. 6.	Copy of act with instructions sent to nurses and midwives. Also pamphlet Care of Babies.
South Carolina	do						10 days, by physician and midwife. Regulation State board of health.	
South Dakota	do	Yes. Rule 62, State board of health, July 25, 1913.					30 days, by physician, authorized person, father, or other person. 1905, c. 63, s. 15, as amended 1911, c. 280.	
Tennessee	do				Yes. Physician, nurse, or midwife. Penalty, \$5 to \$100, 6 months, or both. 1915, c. 62.		10 days, by physician, midwife, parent, or person in charge of institution. 1913, c. 30.	

Texas.....	By midwife, nurse, or other attendant than physician.	Health officer to see that rules are complied with. Rule No. 3, State board of health, 1911.					5 days, by physician, midwife, or parent. Rev. Civ. Stat., 1911, art. 4529, as amended 1911, c. 95. 10 days, by physician, midwife, father, or other person. Comp. Laws 1907, s. 2338x4.	Board of health monthly bulletin contains information.
Utah.....	By physician or midwife.							
Vermont.....	By nurse, relative, or other person having charge.		To physician only. 1910, c. 220.				10 days, by physician, midwife, or head of family. Pub. Stat. 1906, p. 662, s. 3292.	
Virginia.....							10 days, by physician, midwife, parent, or other person. 1912, c. 181, s. 13.	
Washington.....	By nurse, relative, or other person having charge.						10 days, by physician or midwife. Rem. & Bal. Anno. Codes & Stat. 1910, vol. 2, s. 5434.	
West Virginia.....	By midwife, nurse, or other person having charge.	Shall give directions for proper treatment. Penalty \$10 to \$300 and 30 days. Regulation No. 99, Public Health Council.		Yes. Penalty \$10 to \$300 and 30 days. Regulation No. 99, Public Health Council.			30 days, by physician, midwife, or oldest resident member of family or householder. Hogg's Code 1913, ss. 5383, 5384.	Information to be printed in quarterly bulletin of board of health.
Wisconsin.....	By nurse, parent, or other person having charge.	Must instruct parents to employ physician. Not over \$100 fine. Stat. 1915, c. 56, s. 1409a-2.	Yes. Stat. 1915, c. 56, s. 1409a-1.	Yes. Stat. 1915, c. 56, s. 1409a-1.		Yes.....	5 days, by physician or midwife. Stat. 1915, c. 47, ss. 1022-1028.	Illustrated pamphlet giving instructions, rules, and regulations.
Wyoming.....							10 days, by physician, midwife, parent, or other person. Comp. Stat. 1910, s. 2960, as amended 1913, c. 70.	

1 See p. 112 for details.

## DETAILS OF THE STATE REQUIREMENTS FOR REPORTING BABIES' SORE EYES.

[References are to session laws unless otherwise specified.]

**Arkansas.**—Inflamed, swollen, reddened, discharging eyes of infant at any time to be reported, within 6 hours, by midwife, nurse, or other person having charge, to health officer or physician. *Ruling State Board of Health, 1913.*

**California.**—Inflamed, reddened, swollen, discharging eyes of infant under 2 weeks to be reported by physician or other practitioner, midwife, nurse, parent, or other person having charge, within 24 hours, to health officer. Penalty, not more than \$50; for second offense, not more than \$100; for third offense and thereafter, not more than \$200; third conviction sufficient cause for revocation of midwife's or physician's license, etc. 1915, c. 724, p. 1431.

**Colorado.**—Inflamed, reddened, discharging eyes of infant under 2 weeks, should no physician be in attendance, to be reported by parent, nurse, or other person in charge, to local health officer or legally qualified physician. Penalty, not to exceed \$300. *Regulation No. 28, State Board of Health, adopted Feb. 7, 1916.*

**Connecticut.**—Inflamed, swollen, reddened eyes of infant under 2 weeks to be reported by midwife, nurse, or attendant, within six hours, to health officer. Penalty, not more than \$200. *Gen. Stat. 1902, s. 2535.*

**District of Columbia.**—Inflamed, discharging eyes of newborn child to be reported by midwife or attendant other than physician, within six hours, to health officer. Midwife or attendant must not treat disease. Penalty, not more than \$40. *Regulations of commissioners of August 25, 1911, effective September 27, 1911.*

**Idaho.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by midwife, nurse, or other person having charge, within six hours, to health officer or physician. Penalty, not more than \$100 or 90 days, or both. *Rev. Codes, 1908, s. 1108.*

**Illinois.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by physician, midwife, nurse, parent, etc., within six hours, to health officer. Penalty, \$10 to \$100. 1915, p. 366.

**Indiana.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by parents or attendant, within six hours, to health officer. Penalty, \$10 to \$50. *Burns's Anno. Stat. 1914, s. 7607d.*

**Kansas.**—Ophthalmia neonatorum to be reported by physicians. *Resolution State Board of Health.*

**Kentucky.**—Inflamed, swollen, reddened, or discharging eyes of infant under 30 days to be reported by physician, midwife, nurse, parent, within six hours, to health officer. Physicians, midwives, nurses to be instructed annually in regard to recognizing and treating the disease. Penalty, not more than \$100, or, for persistent failure, revocation of license. *Carroll's Stat. 1915, vol. 1, s. 2062b.*

**Louisiana.**—Red, swollen, inflamed, discharging eyes of infant under 2 weeks to be reported by physician, midwife, nurse, parent, or other attendant, within six hours, to health officer. Penalty for first offense, not more than \$50; for second offense, not more than \$100; and for third offense and thereafter, not more than \$200 or revocation of physician's or midwife's license. 1914, No. 174, p. 292.

**Maine.**—Reddened, inflamed eyes of infant under 4 weeks to be reported by midwife, nurse, or person having charge, at once, to physician. Penalty, not more than \$100 or six months. *Rev. Stat. 1903, c. 18, s. 90.*

**Maryland.**—Reddened, inflamed, swollen, discharging eyes of infant under 2 weeks to be reported by midwife, nurse, or other attendant than physician, immediately, to health officer or physician. Penalty, not more than \$5. *Anno. Code, vol. 3, 1914, art. 43, s. 79.*

**Massachusetts.**—Inflamed, swollen, red, discharging eyes of infant under 2 weeks to be reported by physician, nurse, relative, or other attendant, within six hours, to health officer. Penalty, physician, not less than \$50 nor more than \$200; other, not more than \$100. *Rev. Laws, 1902, c. 75, s. 49, as amended 1914, c. 177; s. 50, as amended 1907, c. 480.*

**Michigan.**—Redness, swelling, inflammation or discharge of eyes of infant under 2 weeks to be reported by midwife, nurse, or person having charge, within six hours, to physician. Penalty, not more than \$100 or six months, or both. 1913, No. 123, p. 221.



**Minnesota.**—Inflamed, reddened, diseased eyes of infant under 2 months to be reported by midwife, nurse, parent, or other person having charge, within 12 hours, to health officer. Infraction a misdemeanor. *Regulation State Board of Health.*

**Mississippi.**—Inflamed, reddened, swollen, discharging eyes of infant, within 2 weeks, to be reported by physician, midwife, nurse, relative, maternity home or hospital, parent, or other person in attendance, within six hours, to local health officer. Penalty, first offense \$50; second, \$100; and thereafter, \$200. 1916, c. 115.

**Missouri.**—Red, swollen, discharging eyes of infant under 3 weeks to be reported, at once, by midwife, nurse, or person having charge, to physician. Penalty, \$10 to \$100, or not more than six months, or both. *Rev. Stat. 1909, ss. 8321-8323.*

**Nebraska.**—Ophthalmia neonatorum classed as a contagious disease; physician required to report to State board of health within 24 hours; head of family or other person to report to local board of health. *Rules and Regulations, Nov. 9, 1915.*

**New Hampshire.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by midwife, nurse, or person having charge, within six hours, to the board of health; physicians to report within 24 hours. Penalty, not more than \$25. 1915, c. 85.

**New Jersey.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by midwife, nurse, or other attendant than physician, within six hours, to board of health. Penalty, \$50. *Comp. Stat. 1910, Health, p. 2733.*

**New York.**—Inflamed, reddened eyes of infant under 2 weeks to be reported by midwife, nurse, or other person having charge, immediately, to health officer or physician. Midwife, nurse, etc., must not use remedies. Infraction a misdemeanor. *Con. Laws 1909, c. 40, Penal Law, s. 482. Public Health Manual, State Dept. of Health, p. 129.*

**North Carolina.**—Inflamed, reddened eyes of infant under 2 weeks to be reported by midwife, nurse, or person acting as nurse, within six hours, to health officer or physician. Penalty, \$5 to \$10. 1915, c. 272.

**North Dakota.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by parents or other attendant than physician, within six hours, to health officer. Penalty, \$10 to \$50. *Comp. Laws, 1913, s. 3170.*

**Ohio.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by physician, midwife, nurse, parent, relative, or other attendant, etc., within six hours, to local health officer. Penalty, \$50 to \$100, and \$100 to \$300 for second or subsequent offense. *Gen. Code, 1910, ss. 1248-1 to 1248-7 as added by 1915, p. 321. (See also s. 12787.)*

**Oregon.**—Inflamed, swollen, or reddened eyes of infant under 2 weeks to be reported by midwife, nurse, or other person having charge, within 24 hours, to health officer or physician. Penalty, \$25 to \$100, or not more than 30 days, or both. 1915, c. 210.

**Pennsylvania.**—Inflamed eyes of infant to be reported by physician to health officer or State department of health. Inflamed, swollen, reddened eyes of infant under 2 weeks to be reported by midwife, nurse, or other person having care of infant, within six hours, to health officer or State department of health and physician. Penalty, \$20 to \$100, or 10 to 30 days, or both. 1913, No. 295.

**Rhode Island.**—Inflamed, reddened, swollen, discharging eyes of infant under 2 weeks to be reported by midwife, nurse, or other person having charge, within six hours, to health officer or physician. Penalty, not more than \$100, or six months, or both. *Gen. Laws 1909, c. 343, s. 25, as amended 1914, c. 1081.*

**South Carolina.**—Inflamed, reddened eyes of infant at any time after birth to be reported by midwife, nurse, or other person having charge, immediately, to health officer. Penalty, not more than \$25, or one month, or both. *Crim. Code 1912, s. 443.*

**South Dakota.**—Inflamed eyes of infant, within two months, to be reported by midwife, nurse, parent, or other person having charge, within 12 hours, to health officer. *Rule 61, Reg. Board of Health, July 25, 1913.*

**Tennessee.**—Inflamed, swollen, reddened, discharging eyes of infant under 2 weeks to be reported by nurse, midwife, or other person having charge, within six hours, to health officer or physician. Penalty, \$5 to \$100, or six months, or both. 1915, c. 52. *(See also 1911, c. 10.)*

**Texas.**—Inflamed, reddened eyes of newborn infant to be reported by midwife, nurse, or other attendant than physician, within 12 hours, to health officer or physician. Penalty, \$10 to \$1,000. *Rev. Civ. Stat. 1911, art. 4529, as amended 1911, c. 95.*

**Utah.**—Inflamed, discharging eyes of newborn infant to be reported by physician or midwife, within six hours, to health officer. Penalty, as for misdemeanor. 1911, p. 61.

**Vermont.**—Inflamed, swollen, red, discharging eyes of infant, within 2 weeks, to be reported by nurse, relative, or other person having charge, within six hours, to health officer. *Rule 29, State Board of Health.*

*Washington*.—Red, swollen, discharging eyes of infant under two weeks, to be reported by midwife, nurse, or other person in charge, immediately, to health officer or physician. *Regulation State Board of Health, July 15, 1912.*

*West Virginia*.—Inflamed, swollen, reddened, discharging eyes of infant, to be reported by midwife, nurse, or other person having charge, within six hours, to local health officer. Regulation 100, Public Health Council, adopted January 25, 1916; effective April 1, 1916. Penalty, \$10 to \$300 and 30 days. *1915, c. 11, s. 3.*

*Wisconsin*.—Reddened, swollen, discharging eyes of infant under 2 weeks to be reported by nurse, parents, or other person having charge, within six hours, to health officer. Penalty, not more than \$100. *Stat. 1915, c. 56, s. 1409a-2.1; 1409a-4.*

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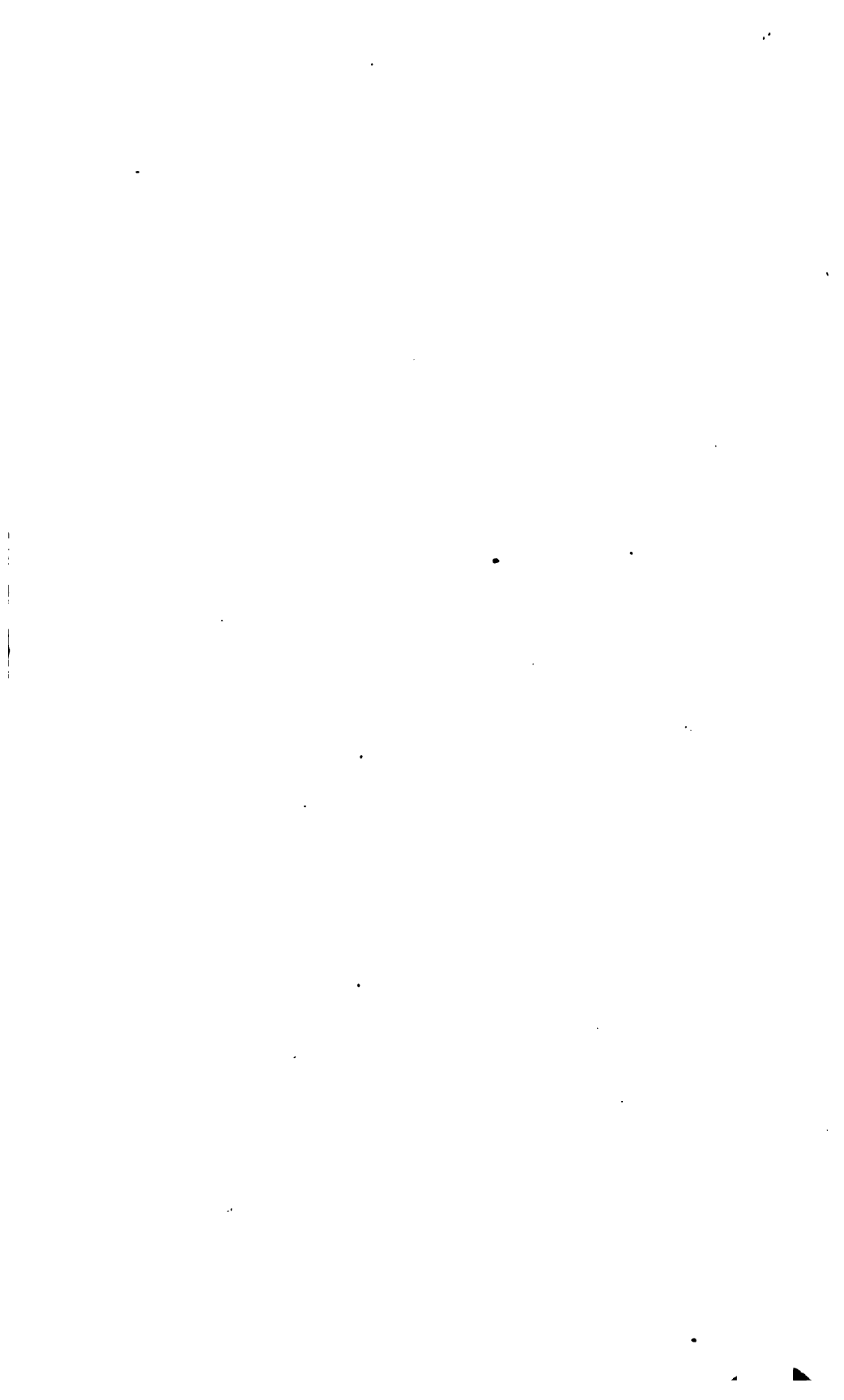
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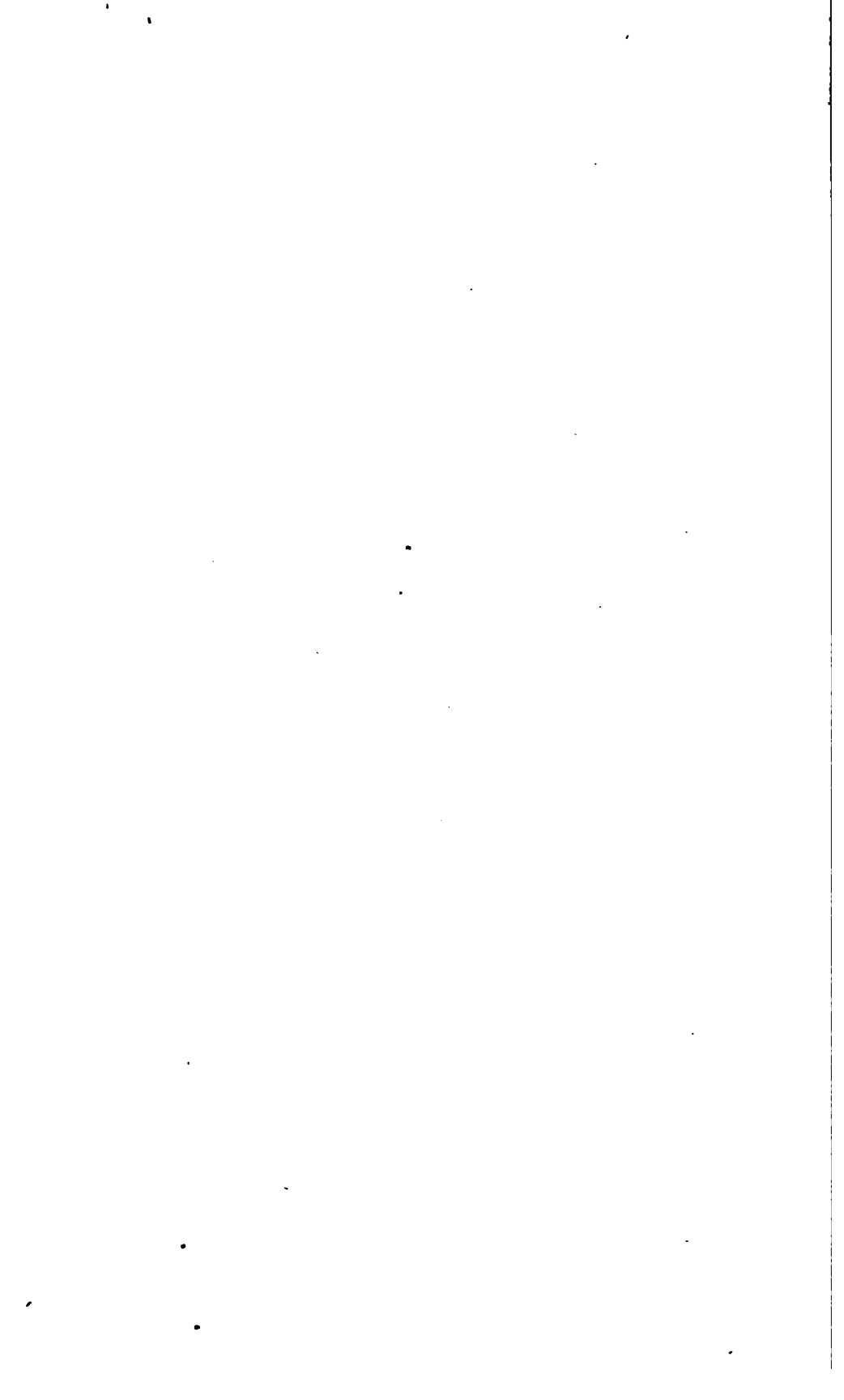
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U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
ALAN G. LARSON, CHM.

# ADMINISTRATION OF CHILD LABOR LAWS

PART 2  
EMPLOYMENT CERTIFICATE SYSTEM  
NEW YORK

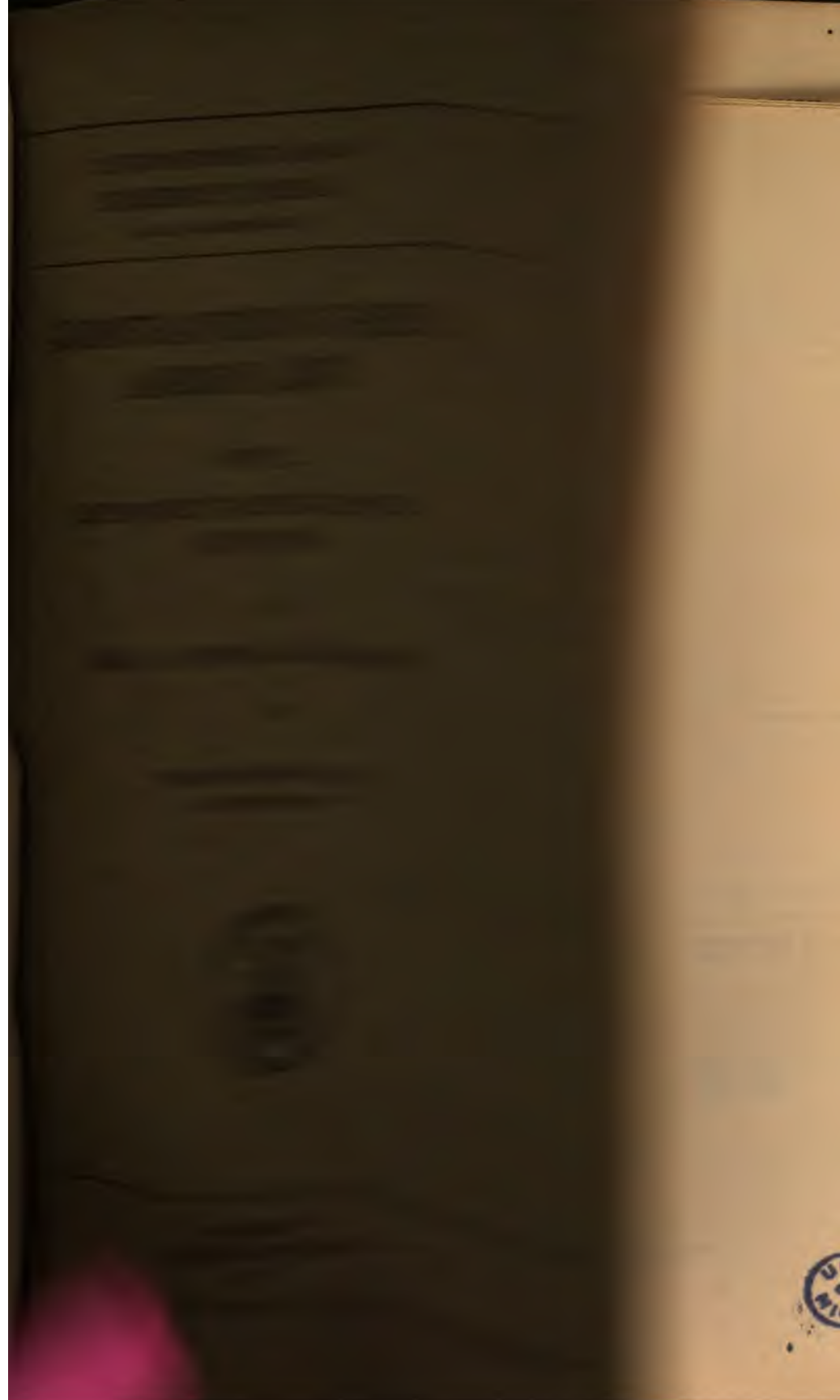
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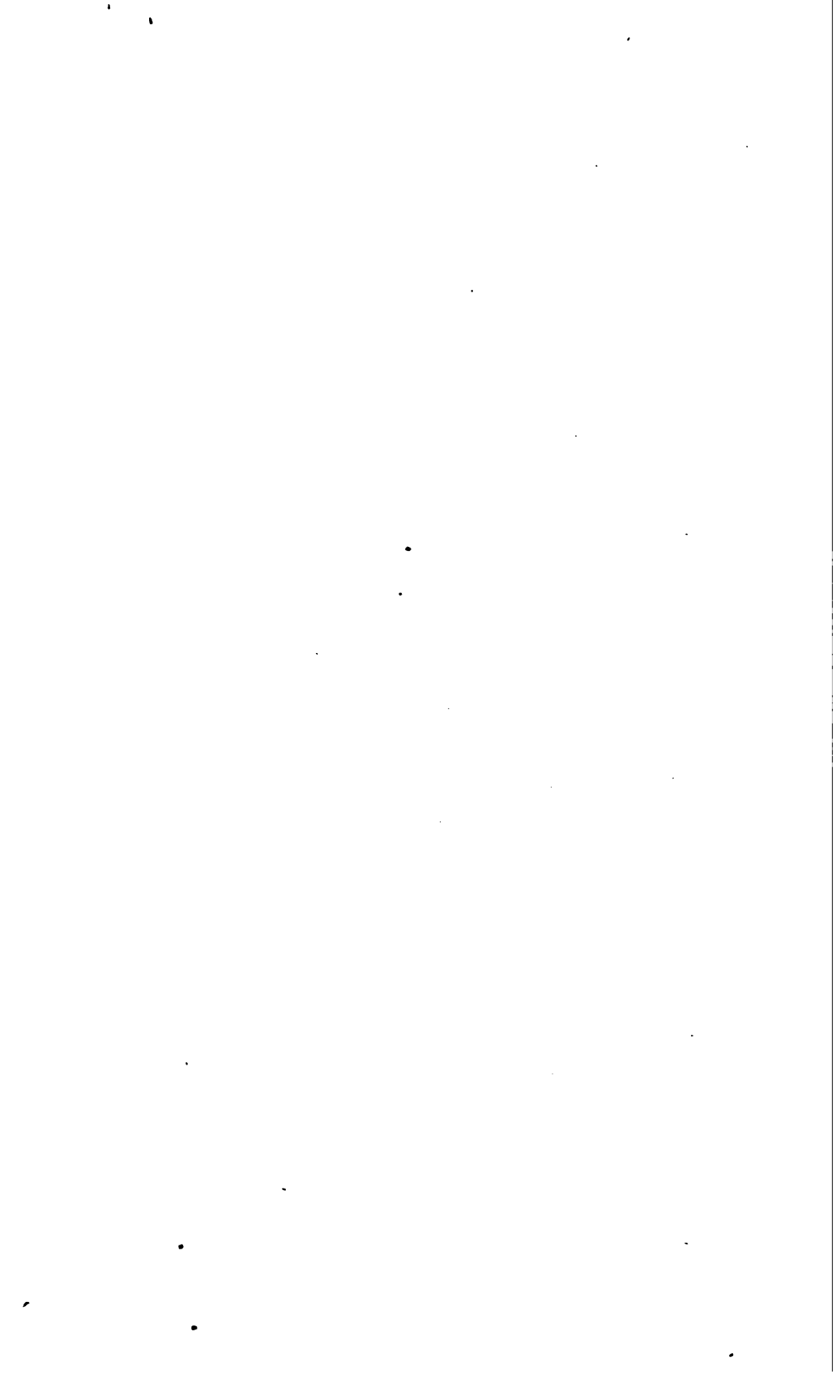
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CHILDREN'S BUREAU  
HELEN L. SUMNER

ADMINISTRATION  
LABOR L

PART I  
EMPLOYMENT CERTIFICATE  
NEW YORK

To  
HELEN L. SUMNER and F

EMPLOYMENT CERTIFICATE  
of the State of New York



## PUBLICATIONS OF THE CHILDREN'S BUREAU

### Annual Reports:

- Third Annual Report of the Child Welfare Bureau to the Secretary of Labor for the fiscal year ended June 30, 1910. 25 pp. 1910.  
Fourth Annual Report of the Child Welfare Bureau to the Secretary of Labor for the fiscal year ended June 30, 1911. 27 pp. 1911.

### Care of Children Series:

- No. 1, *Fostered Care*, by Mrs. May Wood. 12 pp. March, 1910. Bureau publication No. 1.  
No. 2, *Infant Care*, by Mrs. May Wood. 30 pp. 1910. Bureau publication No. 2.

### Dependent, Delinquent, and Delinquent Children Series:

- No. 1, *Large Delinquents in Mothers' Homes in the United States* (Chicago and New England). 100 pp. 1913. Bureau publication No. 7. (Out of print. Revised edition in preparation.)  
No. 2, *Minor Delinquents in the District of Columbia: A brief description of their conditions and the need for classification and training*. 60 pp. 1913. Bureau publication No. 12.

### Infant Mortality Series:

- No. 1, *Baby-Saving Campaigns: A preliminary report on what American cities are doing to prevent infant mortality*. 16 pp. April, 1912. Bureau publication No. 5. (Revised copy published. Copies may be purchased from Department of Commerce at 10 cents each.)  
No. 2, *New Zealand Society for the Health of Women and Children: An example of methods of baby-saving work in small towns and rural districts*. 12 pp. 1912. Bureau publication No. 6.  
No. 3, *Infant Mortality: Results of a field study in Johnston, Pa., based on births in one calendar year*, by Emma Drake. 42 pp. and 6 pp. illus. 1912. Bureau publication No. 9.  
No. 4, *Infant Mortality: Mortality, 9, 11: A study of infant mortality in a suburban community*. 20 pp. 1912. Bureau publication No. 11.  
No. 5, *A Popular Statement of Infant Welfare Work by Public and Private Agencies in the United States*, by Ethel R. Braden. 64 pp. 1912. Bureau publication No. 10.  
No. 6, *Infant Mortality: Results of a field study in Manchester, N. H., based on births in one year*. Harlowe Chase, Darius and Emma Drake. Bureau publication No. 13. (Revised.)

### Industrial Series:

- No. 1, *Child Labor Legislation in the United States*, by Helen J. Sumner and Ethel A. Mott. 344 pp. 20 cents. 1912. Bureau publication No. 14.

Reprints from the above are also issued as follows:

- Child Labor Legislation in the United States*, Separate No. 1. Analytical notes. 412 pp. 2 cents.  
*Child Labor Legislation in the United States*, Separate Nos. 2 to 14. Text of laws passed since September 1, 1906.  
Separate No. 15. Text of Federal Child Labor Law, 1916.  
No. 1, *Administration of Child Labor Laws*.  
Part 1, *Employment Certificate System*, Commission by Helen J. Sumner and Ethel A. Mott. 64 pp. 7 cents. 1910. Bureau publication No. 12.  
Part 2, *Employment Certificate System*, See 1, etc., by Helen J. Sumner and Ethel A. Mott. 64 pp. 4 cents. 1910. Bureau publication No. 11.  
No. 2, *Large Delinquents in Child Labor*. 100 pp. 200. Bureau publication No. 15.

(Continued on third printed page.)

U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
JULIA C. LATHROP, CHIEF

# ADMINISTRATION OF CHILD LABOR LAWS

PART 2  
EMPLOYMENT-CERTIFICATE SYSTEM  
NEW YORK

By  
HELEN L. SUMNER and ETHEL E. HANKS

INDUSTRIAL SERIES No. 2, Part 2  
Bureau Publication No. 17



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1918

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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,

*Washington, D. C., October 9, 1916.*

SIR: I transmit herewith a study of the administration of the New York State child-labor law with especial reference to the employment-certificate system. This is the second in the series of comparative studies of the administration of child-labor laws designed to bring out a standard method.

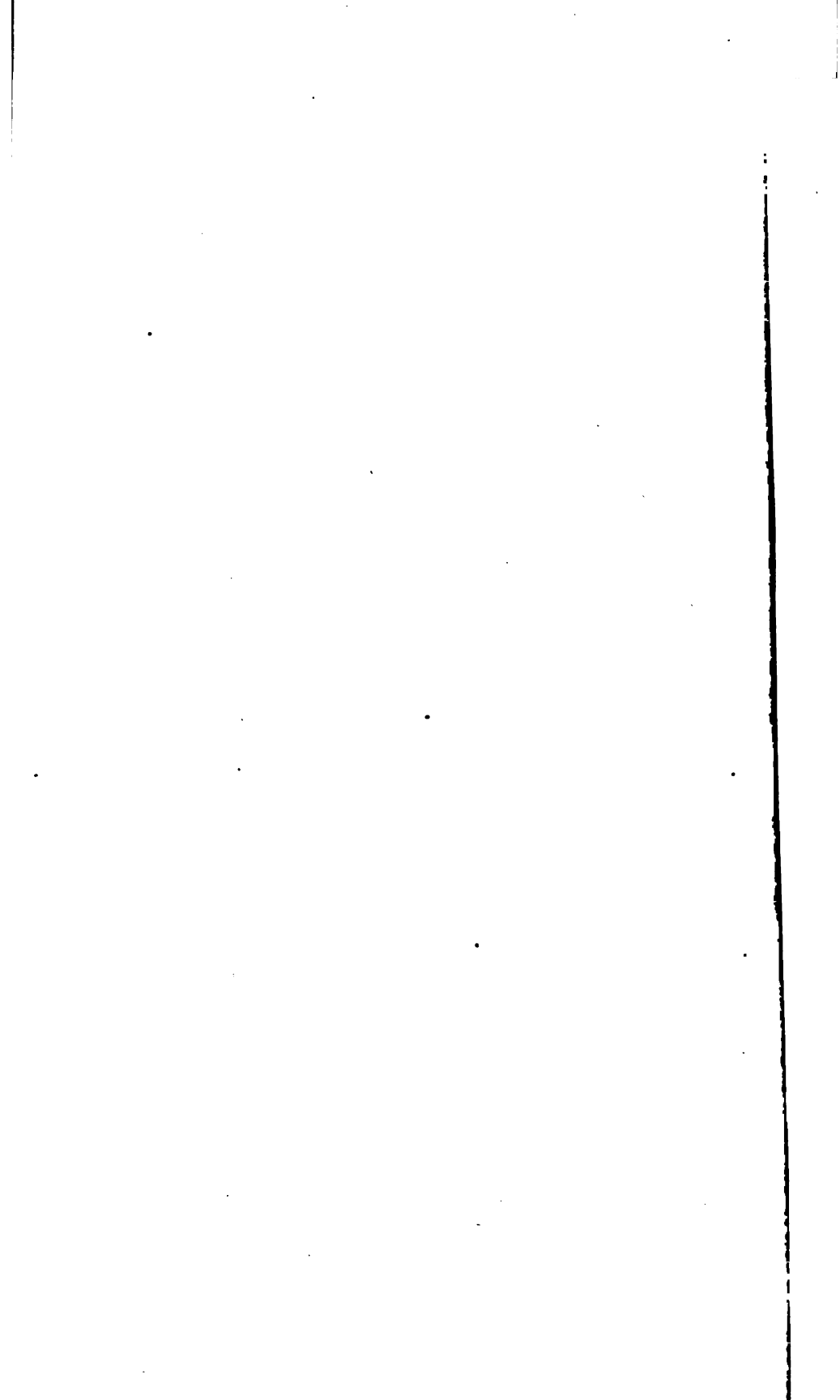
The law upon which the system here described is based differs in many important respects from that which furnishes the foundation for the methods described in the first report of the series, that on Connecticut.

Acknowledgment should be made of the cooperation of the Federal Commission on Industrial Relations in part of the preliminary field work for this report. The series of studies is under the direction of Miss Helen L. Sumner, the assistant chief of the bureau, who has been assisted in this report by Miss Ethel E. Hanks. Especial mention should also be made of the efficient editorial services of Mr. Howard C. Jenness.

Respectfully submitted.

JULIA C. LATHROP, *Chief.*

Hon. W. B. WILSON,  
*Secretary of Labor.*









# ADMINISTRATION OF THE EMPLOYMENT-CERTIFICATE SYSTEM IN NEW YORK.

## INTRODUCTION.

The child-labor and employment-certificate laws of New York State differ in many important respects from those of Connecticut, described in the first report of this series. In both States 14 years is the minimum age and children from 14 to 16 must secure certificates before they can be employed legally; but in Connecticut the law is State wide in its application, whereas in New York various sections are in force in cities and villages of different sizes. In Connecticut the list of places of employment covered by the law includes "mechanical" establishments, and this term is held to bring under its provisions practically all child laborers except newsboys and children employed in agricultural pursuits and in domestic service.<sup>1</sup> In New York, on the other hand, different lists of places of employment to which the law applies are given for cities and villages of different sizes, but no list includes any general term which can be held to cover occupations not specifically mentioned.<sup>2</sup>

In New York State employment certificates issued by local health authorities must be obtained by children from 14 to 16 years of age as a condition of employment:

A. At any time,

1. In any place in the State in—

Factories.<sup>3</sup>

Mercantile establishments.

Business offices.

Telegraph offices.

Restaurants.

Hotels.

Apartment houses.

Distribution or transmission of merchandise or messages.<sup>4</sup>

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<sup>1</sup> U. S. Children's Bureau. Employment Certificate System, Connecticut. Bureau publication No. 12, p. 8.

<sup>2</sup> The exact application of the minimum-age and employment and school-record certificate provisions of the New York laws is discussed in the Appendix, pp. 111 to 115.

<sup>3</sup> Labor Law, sec. 70; Education Law, sec. 626. For the text of these sections see pp. 120, 126.

<sup>4</sup> Education Law, sec. 626. Labor Law, sec. 163, requires certificates only in places of 3,000 inhabitants or more in mercantile establishments, etc. For the text of these sections see pp. 126, 124.

## A. At any time—Continued.

2. In cities and villages having a population of 3,000 or more in—

Theaters.<sup>1</sup>

Places of amusement.

Bowling alleys.

Barber shops.

Shoe-polishing establishments.

Distribution or transmission of articles other than merchandise or messages.

Distribution or sale of articles.<sup>2</sup>

3. In first and second class cities in—

Any other occupation.<sup>3</sup>

## B. During school hours,

1. In places, other than first and second class cities, having a population of 5,000 or more in—

Any other occupation.<sup>4</sup>

The New York law also requires children from 14 to 16 years of age to obtain "school-record certificates" from local school authorities as a condition of employment at any time, in any place, and in any occupation where employment certificates are not required.<sup>5</sup>

To obtain a school-record certificate a child is not required to produce the same evidence of age or to meet the same physical requirements as to obtain an employment certificate. For an employment certificate the labor law specifies carefully the required evidence of age, whereas for a school-record certificate the education law does not state what kind of evidence is acceptable, but merely requires that the child shall be over 14 and that the record shall contain the date of his birth "as shown on the school record." A physical examination is required, as will be seen, for an employment certificate but not for a school-record certificate. The educational requirements are the same<sup>6</sup> for both. In practice, as children are required frequently, if not generally, to secure employment certificates before having their names taken from the school registers, the school-record certificate is of little importance except as a prerequisite to an employment certificate. For this reason no special attention is given in this study to the school-record certificate as distinguished from the school record discussed under "Educational requirements."

<sup>1</sup> Children taking speaking parts in theatrical performances are not affected by this provision but are covered by Penal Law, ch. 40, art. 44, sec. 485 as amended by 1916, ch. 278.

<sup>2</sup> Labor Law, sec. 162. For the text of this section see p. 124.

<sup>3</sup> Education Law, sec. 626. For the text of this section see p. 126.

<sup>4</sup> Education Law, sec. 621. For the text of this section see p. 125. For definition of cities of different classes, and of villages and towns, see footnote 7, p. 112.

<sup>5</sup> Education Law, secs. 624 and 626. For the text of these sections see pp. 125, 126.

<sup>6</sup> Education Law, sec. 630, and Labor Law, secs. 73 and 165. For the text of these sections see pp. 127, 122, 124.

The requirements for obtaining certificates are notably higher in New York than in Connecticut. The evidence of age to be produced is carefully specified in the law instead of being left to the discretion of the administrative authorities as in Connecticut. The educational standard is completion of the sixth<sup>1</sup> instead of the fifth grade, as is practically the requirement in Connecticut. But most important of all, every child from 14 to 16 years of age who applies for a certificate in New York is required by law to undergo a physical examination, whereas in Connecticut only children who appear physically unfit are subjected to any physical test.

In New York, as in Connecticut, the mere possession of a certificate to work does not exempt a child from school attendance; he must be actually at work. To be exempt from school attendance in New York, indeed, a child 14 to 16 years of age not only must hold an employment or school-record certificate but must be "regularly and lawfully" engaged in some "useful employment or service."<sup>2</sup> This does not necessarily mean that the child must be engaged in remunerative work. Either an employment certificate or a school-record certificate acts as a permit to stay out of school to engage in "any useful employment or service," for example, to help in the housework or in the care of the baby at home. The parent is responsible for the school attendance not only of a child who has no certificate but also of a child who, though he has a certificate, is not "regularly engaged in any useful employment."

One fundamental difference, however, is to be noted between the employment-certificate system of Connecticut and that of New York. In Connecticut the certificate must be delivered by the issuing officer to the employer; the employer must notify the issuing office of both the commencement and the termination of the child's employment; and the child must secure a new certificate for each separate employer.<sup>3</sup> In New York, on the other hand, on the application of the parent or guardian and after fulfillment of the requirements, the employment certificate is given to the individual child; it is regarded as his property and authorizes any employer to employ him subject to the other regulations of the law. In addition to the date and place of birth of the child and a statement to the effect that the required papers have been duly examined, approved, and filed, and that the child has appeared before the issuing officer and been examined, it must contain, for the purpose of identification, the child's signature and a description consisting of the color of his

<sup>1</sup> After Feb. 1, 1917, the standard for children under 15 will be completion of the eighth grade. Acts of 1916, ch. 465. For the text of this act see pp. 132-133.

<sup>2</sup> Education Law, secs. 621 and 624. For the text of these sections see pp. 125, 126.

<sup>3</sup> The parent has a copy of the certificate which the child can use temporarily, but this copy is clearly marked "For parent; not good for employer longer than one week." U. S. Children's Bureau. Employment Certificate System, Connecticut. Bureau publication No. 12, p. 16.

hair and eyes, his height, weight, and any distinguishing facial marks.<sup>1</sup> While the child is employed the certificate must be kept on file by the employer in the place of employment and must be shown on demand to inspectors of the department of labor or to attendance officers,<sup>2</sup> but when the employment ceases the employer merely gives the certificate back to the child.<sup>3</sup> He is not required to notify any public authority either that he has employed the child or that the child's employment has ended.

In addition to keeping employment certificates, every employer covered by the New York labor law—i. e., operating a factory anywhere in the State or conducting, in a city or village with a population of 3,000 or more, a mercantile or other establishment mentioned in the labor law—must keep a register containing the name, address, birthplace, and age of every child under 16 employed in his establishment. This register, like the certificate, is open to inspection by agents of the department of labor and by attendance officers.<sup>4</sup>

The other important provisions relating to child labor, in the enforcement of which employment certificates may be used as evidence of age of certain children to whom the law applies, establish in New York decidedly higher standards than in Connecticut. Whereas in Connecticut children under 16 are permitted to work 10 hours a day, in New York they are permitted to work only 8 hours a day for not more than 6 days a week, such hours to be between 8 a. m. and 5 p. m. in factories and between 8 a. m. and 6 p. m. in mercantile establishments.<sup>5</sup>

The list of dangerous occupations and industries in which children under 16 are forbidden to engage is also much longer and more complete in New York<sup>6</sup> than in Connecticut.

So far as the administration of the employment-certificate law is concerned, however, the most important difference between Connecticut and New York is that in the former one State agency and in the latter two local agencies and two State agencies are concerned in its enforcement. The centralization of administrative power in Connecticut and its diffusion in New York have far-reaching consequences throughout the employment-certificate systems of the two States.

The Federal census statistics of child labor in New York State in 1910 show 35,757 boys and 24,485 girls; in all, 60,242 children 14 and 15 years of age engaged in gainful occupations. Of these, 10,641 children were engaged in agricultural pursuits and in domestic

<sup>1</sup> Labor Law, secs. 71, 72, 163, and 164. For the text of these sections see pp. 120, 122, 124.

<sup>2</sup> Labor Law, secs. 70, 76, 162, and 167; Education Law, sec. 633. For the text of these sections see pp. 120, 122, 124, 128.

<sup>3</sup> Labor Law, secs. 76 and 167. For the text of these sections see pp. 122, 124.

<sup>4</sup> Labor Law, secs. 76 and 167; Education Law, sec. 633. For the text of these sections see pp. 122, 124, 128.

<sup>5</sup> Labor Law, secs. 77 (as amended by 1912, ch. 539, and by 1913, ch. 465) and 161 (as amended by 1914, ch. 331, and by 1915, ch. 396).

<sup>6</sup> Labor Law, sec. 93 (as amended by 1910, ch. 107, and by 1913, ch. 464); Penal Law, sec. 485.

and personal service. Of the 5,623 classified as in the latter group, 4,395 were servants and the remaining 1,228 were in occupations covered by the law at that time as well as by the law of 1915, with the exception of those in barber shops and shoe-polishing establishments.

More than half of the working children of the State in 1910 were in the city of New York, where 37,235 boys and girls 14 and 15 years of age were engaged in gainful occupations. The three first-class cities, New York City, Buffalo, and Rochester, moreover, contained together 42,109 working children of this age group, more than two-thirds of all those in the State.

During the year ended September 30, 1914, 42,468 certificates were issued in New York State.

The table following gives certain data for New York City in regard to employment certificates for the year ended December 31, 1915.<sup>1</sup>

*Employment certificates, New York City, year ended December 31, 1915.*

Borough.	Applications for certificates.						
	Received.	Granted.	Refused.				
			Total.	Insuffi- cient tu- tion. <sup>2</sup>	Educa- tion. <sup>2</sup>	Over age.	Under age.
The city .....	39, 443	37, 131	2, 364	155	79	741	109
Manhattan .....	18, 665	17, 228	1, 543	120	38	539	66
Bronx .....	4, 119	3, 880	230	11	9	40	11
Brooklyn .....	13, 225	12, 749	446	7	21	118	1
Queens .....	2, 888	2, 747	134	16	11	39	31
Richmond .....	546	527	11	1		5	

Borough.	Applications for certificates—Continued.					Duplic- ates issued.	Certi- ficates expired.	Certi- ficates in force at end of year.
	Refused—Continued.							
	Physical incapacity.							
	Total.	Malnu- trition.	Cardiac.	Pul- monary.	Miscel- laneous.			
The city .....	1, 280	454	429	9	388	1, 555	37, 252	57, 434
Manhattan .....	780	365	219	4	192	834	17, 719	25, 288
Bronx .....	159	38	87	3	31	148	3, 789	4, 928
Brooklyn .....	299	33	106	1	159	495	12, 448	23, 464
Queens .....	37	16	16	1	4	69	2, 848	3, 167
Richmond .....	5	2	1		2	9	448	587

Fewer certificates were issued in 1914 than in 1913 because of the fact that an amendment to the law effective September, 1913, added completion of the sixth grade to the former requirement—ability to

<sup>1</sup> Statistical report of division of employment certificates of the bureau of child hygiene, department of health, New York City, for the year ended Dec. 31, 1915.

<sup>2</sup> See p. 26.

pass an educational test.<sup>1</sup> In New York City 33,192 certificates were granted during the year 1914 and 1,390 were temporarily or permanently refused, whereas, in 1913, 41,507 were granted and 2,185 were refused. In Buffalo 2,900 certificates were granted during 1914 and 753 temporarily or permanently refused—a decrease from 3,993 granted and an increase from 642 refused during 1913. In Rochester 1,429 certificates were issued during 1914 and 883 were temporarily and 2 permanently refused, as against 1,947 granted and 1,469 refused during 1913.

Because of differences in both the application of the law and the organization of the issuing offices in cities of different classes, the administration of the employment-certificate law of New York State was studied in several cities of each class, as well as in cities with diverse industries employing large groups of children, so that the conditions discussed might be fairly representative of those throughout the State. The first-class cities—New York City, Rochester, and Buffalo—were all visited. Those of the second class visited were Albany, the capital of the State; Troy, a manufacturing city north of Albany, near the junction of the Hudson and Mohawk Rivers; and Utica and Syracuse, in the central part of the State. Those of the third class were Little Falls, in the central part of the State; Cohoes, near Troy; and Tonawanda, near Buffalo. In addition the village of Victory Mills, northeast of Albany, was visited.

The methods used in New York City were first studied and have been used, so far as possible, as the basis of comparison in discussing the methods in Buffalo and Rochester and in the second-class cities. In the third-class cities the procedure was found to be so varied that, when necessary, each has been described separately. In all these places except Little Falls, Tonawanda, and Victory Mills the descriptions are based on actual observation of procedure, as well as on statements of officials. The field studies upon which this report is based were completed in May, 1915, and except when otherwise indicated the conditions existing at that time furnish the basis both for the description of facts and for the conclusions.

### GENERAL ADMINISTRATION.

In New York State the administration of laws relating to the employment of children from 14 to 16 years of age is in the hands of four agencies—the local health departments or health officers, who issue employment certificates and who in small cities and towns are authorized to inspect mercantile establishments; the local boards of education or public-school authorities, who issue school records and enforce the compulsory school-attendance law; the State department

<sup>1</sup> Labor Law, secs. 73 and 165; Education Law, sec. 630, subsec. 1. For the text of these sections see pp. 122, 124, 127.



of education, which has general supervision over the enforcement of the compulsory-education law throughout the State and may withhold one-half of the State appropriation from any school district which fails to enforce school attendance;<sup>1</sup> and the State industrial commission, which, through inspectors of the department of labor, of which it is the head, enforces the provisions of the labor law, and supervises the issuance of employment certificates.

Three forms to be used in the administration of the employment-certificate system are specified in the labor law: The school-record blank,<sup>2</sup> the physical-examination blank,<sup>3</sup> and the employment-certificate blank.<sup>4</sup> The law provides that in cities of the first and second classes the school-record and employment-certificate blanks shall be approved by the industrial commission; that in other cities and in towns and villages these forms shall be prepared and furnished by the industrial commission; and that no school record or employment certificate other than those approved or furnished by the industrial commission shall be used.<sup>5</sup> The industrial commission, however, has supervision only over the form and not over the accuracy of the statements contained in the school record.

Although the industrial commission approves the form, the preparation of the school-record blank has been left to the State department of education, which provides a model conforming to the law. Upon this model the forms furnished by local authorities are supposed to be based. In New York City the department of education provides school-record blanks to public schools and to parochial schools if desired; the department of health furnishes them to parochial schools and to children from other cities applying without them. In Buffalo the department of health, and in Utica and Cohoes the board of education, furnishes them to all schools, public and parochial. In all the other places visited the State department of education furnishes the forms. In Syracuse the blanks are available at the bureau of health, and in the other places at the office of the superintendent of schools.

The form used for the record of the physical examination must be furnished by the State industrial commission to the local departments of health<sup>6</sup> and is, therefore, uniform throughout the State.

The form of an employment certificate must be approved by the industrial commission; the contents are specified in the law. In 1913, when the labor law was amended to provide that "no employment certificates other than those approved or furnished by the

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<sup>1</sup> Education Law, sec. 636. For the text of this section see p. 128.

<sup>2</sup> Form 1, p. 134.

<sup>3</sup> See p. 43.

<sup>4</sup> Form 2a, p. 134.

<sup>5</sup> Labor Law, secs. 75 and 166. For the text of these sections see pp. 122, 124.

<sup>6</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

commissioner of labor [industrial commission]"<sup>1</sup> should be used, instructions and a model form of certificate were sent to every issuing officer in the State. The department of labor furnishes blank employment certificates free to any issuing officer, and officers furnishing their own are supposed to base them on the model adopted by the department. All the first and second class cities in the State furnish their own forms. The third-class cities visited use the form furnished by the department of labor.

#### LOCAL DEPARTMENTS OF HEALTH.

Under the labor law the local departments of health have two important duties—the issuance of employment certificates and the enforcement of the law relating to the inspection of mercantile establishments in places, other than first and second class cities, having a population of 3,000 or more.

Although the responsibility for issuing employment certificates rests upon the "commissioner of health or the executive officer of the board or department of health," this "board, department, or commissioner" may designate some other officer of the board or department of health to issue certificates. Frequently, indeed, a clerk employed by the department of health is designated as the issuing officer. The physical examination, however, must always be made by "a medical officer of the department or board of health."<sup>2</sup> The exact apportionment of the work of issuing certificates depends in part upon the way in which the department of health is organized.

The organization of departments of health differs widely in cities of different classes and even in those of the same class. In New York City the department is under the direction of a board of health consisting of the commissioner of health (who is also president of the board and executive officer of the department of health), the police commissioner, and the health officer of the port. The first two are appointed by the mayor and the last by the governor of the State. The department comprises eight bureaus, one of which, the bureau of child hygiene, includes as one of its seven divisions the division of employment certificates. In Buffalo the department of health is under the direction of a board consisting of the mayor, the president of the board of public works, and the health commissioner. One of the ten bureaus of this department is the bureau of child hygiene, a division of which issues employment certificates. In Rochester a commissioner of public safety appoints the health officer, and these two officers in conjunction have all the powers and perform all the duties which in New York City and Buffalo are vested in the board

<sup>1</sup> Labor Law, secs. 75 and 166. For the text of these sections see pp. 122, 124.

<sup>2</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

of health. The section of child labor of the bureau of health issues employment certificates. In second-class cities the organization of the health department is similar to that in Rochester. In a third-class city the board of health consists of the mayor and at least six other persons, one of whom is a physician; in a town it is the same as the town board, which consists of the town supervisor and the several justices of the peace; and in a village it consists of the board of trustees. Each of these local boards of health appoints a physician, not a member, to act as health officer.

In New York City an issuing office is maintained in each of the five boroughs—Manhattan, Brooklyn, Bronx, Queens, and Richmond. The work in each of these is in charge of a chief who reports to the chief of the division of employment certificates. The latter has general supervision over all issuing offices. The headquarters are in the Manhattan office. In this office there are regularly employed one chief clerk, one clerk who interviews children and parents when they first enter the office, one clerk who issues certificates, two physicians—a woman who is at the office half of each day and a man who is at the office the other half of each day—and a nurse to assist the physicians. At the Brooklyn office the regular force consists of two clerks, two medical examiners, and one nurse to assist the examiners. The examiners—a man and a woman—alternate, each being on duty half a day. Either one examines both boys and girls. The issuing office of Bronx Borough is in charge of a medical inspector who examines the children, but a nurse interviews them when they first enter and issues the certificates after the examination. At times a clerk interviews applicants and other persons coming to the office and also passes upon some of the documents presented. In Queens Borough the office force consists of a medical inspector in charge, who examines all applicants; a nurse who assists him, interviews the children, and issues certificates; and a clerk who assists in various ways. In Richmond Borough the borough chief makes the physical examination and a clerk interviews children, issues certificates, and has charge of the files.

In each of the other first-class cities only one issuing office is maintained. In the Buffalo office the regular force consists of the medical inspector in charge who examines the applicants; a woman attendant who interviews children and parents, assists the physician in his examinations, and issues certificates; and a clerk who assists in interviewing children and in issuing certificates. In Rochester a graduate nurse devotes her whole time to interviewing applicants, to making the larger part of the physical examinations, and to issuing certificates. The health officer makes the more difficult tests of the physical examination.

During the busy seasons additional school nurses and medical inspectors—and in New York City, clerks as well—assist in the issuing offices in all the first-class cities.

In the second-class cities visited the work of issuing certificates is nominally in direct charge of the health officer. In Albany a clerk, who is the commissioner of deeds, performs all the clerical work, administers oaths when necessary, and sometimes interviews children. Usually, however, applicants are interviewed by whatever medical inspector happens to be in the office. In Troy the health officer is the examining physician and the health bureau clerk administers oaths and issues certificates. In Utica the health officer supervises the issuance of certificates; but the deputy health officer usually makes the physical examination and the clerk of the bureau, who is also the commissioner of deeds, administers oaths when necessary and issues certificates. In Syracuse the deputy health officer instead of the health officer supervises the work and administers oaths to parents. Two school medical inspectors are detailed on alternate weeks to give physical examinations and a clerk issues certificates.

In none of the third-class cities visited, except Cohoes, does the health officer have any assistance in the issuing of certificates. At Cohoes the clerk of the board of health comes to the office when necessary to administer oaths to parents.

In Victory Mills the health officer examines applicants and the village clerk issues certificates.

Even in cities of the same class, it appears, the issuing officer is sometimes a physician and sometimes a clerk. In New York City the division of duties made necessary by the large number of applicants makes it possible for the medical examiner to pass only on the physical condition of the children. In Buffalo and Rochester, on the other hand, the physician who regularly makes the physical examination is the consulting authority on other points and is regarded as the issuing officer. In Little Falls and Tonawanda this physician is the health officer and performs all the work necessary in the procedure of issuance. In Albany, Troy, Utica, Syracuse, Cohoes, and Victory Mills the examining physician, whether the health officer, a deputy, or a designated physician, is not regarded as the issuing officer and assumes little responsibility beyond passing upon the physical condition of the child.

The method of selecting employees in the health departments visited differs widely. In New York City and Buffalo all appointments are made by the local board of health and, with the exception of the heads of bureaus, are under civil-service regulations. In none of the other places visited, except Cohoes, is the health officer under such regulations, but in Rochester and in the second-class cities all

clerks and inspectors are chosen from a competitive civil-service list. In Cohoes all employees of the board of health, including the health officer, are appointed from such a list; in Victory Mills no civil-service regulations are in effect under the board of health.

#### LOCAL SCHOOL AUTHORITIES.

The local school authorities perform two functions which have a direct relation to children desiring to go to work. First, they pass upon the educational equipment and the school attendance of such children and issue school records to children from 14 to 16 years of age who are eligible, so far as their education is concerned, for employment certificates. Second, they enforce school attendance of all children, including those of working age, and as one method of enforcement they take a regular school census.

According to the compulsory education law, the school records are issued by the following officers: In cities of the first class, by the principal or chief executive officer of the school which the child has attended; in other cities and in school districts having a population of 5,000 or more and employing a superintendent of schools, by the superintendent only; and in all other school districts by the principal teacher of the school.<sup>1</sup>

School attendance is enforced by the local attendance officers<sup>2</sup> and through the taking of a regular census of children in every school district of the State.<sup>3</sup> In first-class cities the census is constantly in progress; in other cities it is taken once every four years, and in rural districts annually. The facts to be ascertained by enumerators relate to residence, date of birth, names of parents or guardians, literacy, school attendance, and employment of all children between 4 and 18 years of age (5 and 18 in rural districts).

In the three first-class cities—New York, Buffalo, and Rochester—permanent census boards were established under a law of 1908, which prescribed that these boards should maintain through the police force a constant census amended from day to day. In Buffalo and in Rochester this board consists of the mayor, the superintendent of schools, and the police commissioner, and appoints a secretary and other employees.

In New York City, by an act of the legislature of 1914, the compulsory education division of the department of education and the permanent census board were consolidated into a "bureau of compulsory education, school census, and child welfare," which

<sup>1</sup> Education Law, sec. 630, subsec. 2. For the text of this section see p. 128.

<sup>2</sup> Education Law, sec. 632. For the text of this section see p. 128.

<sup>3</sup> Education Law, secs. 650-653; Greater New York Charter, 1901, ch. 461, sec. 1069, subdivision 8, added by Acts of 1914, ch. 479. For the text of these sections see pp. 129, 130.

works under the general supervision of the city superintendent of schools, who himself acts under the direction of the board of education. This bureau, known as the bureau of attendance, has for its purpose the enumeration of children, the enforcement of school attendance, and the handling of problems which affect the school attendance, education, employment, and welfare of children from 4 to 18 years of age. It has one main office with 13 branch offices in different parts of the city. To carry on its work the bureau employs a director and an assistant director appointed by the board of education for terms of six years each, a chief attendance officer, 2 division superintendents, 13 district supervising officers, 2 women supervisors of the welfare of high-school girls, 1 newsboy attendance officer, 1 medical supervisor, 2 supervisors of census enumeration, 1 "man at large," 133 attendance officers (20 of them women) who are also census enumerators, and 73 clerks, 1 of whom is a stenographer—a total force of 231. Commercial high-school students also assist in the stenographic work of the office.

In Buffalo the department of compulsory education, in cooperation with the permanent census board of the city, enforces school attendance. The director of compulsory education is appointed by the superintendent of education and supervises the work of the 15 attendance officers. Under the direction of the secretary of the permanent census board 60 policemen are employed whenever a census of children is taken. In the office are regularly employed six clerks, and during and after a census extra clerks assist in tabulating results.

In Rochester the efficiency bureau of the department of public instruction and the permanent census board of the city enforce school attendance. In the office of the efficiency bureau are employed a director (who is one of the assistant superintendents of schools), two stenographers, and two clerks. Four attendance officers are employed in the field. Six police enumerators, one in each precinct of the city, are employed constantly under the direction of the secretary of the permanent census board, and in the office of this board are employed one chief clerk (who is a stenographer) and two assistant clerks.

In the rest of the State the school census is taken by employees, most of them temporary, of the local school authorities, and school attendance is enforced by regular attendance officers. Though the selection of these officers is a local matter, their appointment is not left to the discretion of the local officials. The law provides that one or more attendance officers shall be appointed by the school authorities "of each city, union free school district, or common school district whose limits include in whole or in part an incorporated village"; and that one or more attendance officers whose jurisdiction shall extend over school districts not otherwise provided

for shall be appointed, subject to the written approval of the school commissioner of the district, by the town board of each town. In the former class of places the superintendent of schools, and in the latter the school commissioner, supervises the work of the attendance officers.<sup>1</sup>

Of the smaller places visited, Albany had three attendance officers, Troy and Syracuse had two each, and Utica, Tonawanda, Cohoes, Little Falls, and Victory Mills had one each.

With few exceptions the attendance officers, enumerators, and other employees of the boards of education in the places visited and of the census boards in the first-class cities are appointed under civil-service regulations. Those who are not thus appointed are the director and assistant director of the bureau of attendance of New York City, whose qualifications are stated in the law; the secretaries of the census boards in Buffalo and in Rochester; the clerks in the efficiency bureau in Rochester; and the attendance officers in Syracuse and Victory Mills.

#### STATE INDUSTRIAL COMMISSION.

The enforcement of child-labor laws in factories throughout the State and in mercantile establishments in first and second class cities is vested in the State industrial commission.<sup>2</sup> This commission, which became the head of the department of labor on June 1, 1915, consists of 5 commissioners appointed by the governor and is advised by an unpaid industrial council of 10 members, also appointed by the governor. Six bureaus are provided for in the labor law: Inspection, statistics and information, mediation and arbitration, industries and immigration, employment, and workmen's compensation.<sup>3</sup> The only bureau, however, which has direct relation to the enforcement of child-labor laws is that of inspection. This bureau, subject to the supervision and direction of the industrial commission, has charge of all inspections made for enforcing the provisions of the labor laws. It consists of four divisions. The division of factory inspection enforces all laws relating to the employment of children in factories throughout the State. The division of mercantile inspection enforces all laws relating to the employment of children in mercantile establishments in first and second class cities. The division of home-work inspection aids in the enforcement of the law prohibiting home work of children under 14 years of age, and under 16 years of age without certificates. The division of industrial hygiene, through the section of medical inspection, has charge of both the physical

<sup>1</sup> Education Law, sec. 632. For the text of this section see p. 126.

<sup>2</sup> Labor Law, secs. 56 and 172. For the text of these sections see pp. 118, 124.

<sup>3</sup> Labor Law, sec. 42 (as amended by 1915, ch. 674).

examination and the medical supervision of children employed in factories.<sup>1</sup>

In order to assist in the general administration of the labor laws, provision is made that all factories must be registered with the industrial commission within 30 days after commencing business or after a change of location.<sup>1</sup>

The main offices of the industrial commission are in New York City. The division of factory inspection has headquarters at New York City, with branch offices in Albany, Buffalo, Rochester, and Utica. The division of mercantile inspection has headquarters in New York City, with no branch offices.

The commission has 8 supervisory inspectors, 131 deputy factory inspectors, and 20 mercantile inspectors. All the employees in the department except the deputy commissioners and counsel are under civil-service regulations.

### STATE SUPERVISION.

General supervision over the administration of child-labor laws is vested in the State industrial commission as to the provisions of the labor law and in the State commissioner of education as to the provisions of the education law. The industrial commission is directed by law to "inquire into the administration and enforcement" of the provisions of the labor law relating to the employment of children, and for this purpose the commission or persons authorized by it have access to all papers and records kept by local officers charged with the duty of issuing employment certificates.<sup>2</sup> The industrial commission may also investigate and report upon "all matters relating to the enforcement and effect" of the provisions of the labor law relating to child labor.<sup>3</sup> At the time the provision relating to supervision went into effect, in October, 1913, the department of labor sent out general instructions with regard to the methods of issuing certificates, the character of records to be kept, and the method of making these records; and also suggestions as to the method of making physical examinations. Otherwise, practically no State supervision over the issuing of certificates had been exercised up to the time of this investigation.

Reports of the issuance of certificates are required by law. The health commissioner of a city, village, or town must transmit to the industrial commission, between the 1st and 10th of each month, a list of all children to whom certificates have been issued during the preceding month and a duplicate copy of the physical-examination

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<sup>1</sup> Labor Law, secs. 53-61 and 69. For the text of these sections see pp. 117-119, 120.

<sup>2</sup> Labor Law, secs. 75 and 166. For the text of these sections see pp. 122, 124.

<sup>3</sup> Labor Law, sec. 51. For the text of this section see p. 117.



record of every child who has received or been refused a certificate.<sup>1</sup> When reports are received at the department of labor the date of birth given in the lists is checked with that on the physical-examination sheet to see if they correspond. If errors are discovered in such dates, the records are sent back to the issuing offices to be corrected.

Supervision by the State department of education is exercised in practice solely with a view to the enforcement of the compulsory school-attendance law. From every school outside of New York City, Buffalo, and Rochester regular monthly reports of attendance are required by the compulsory education division of the State department of education and reports of the operation of the census law are required monthly from Buffalo and Rochester and, whenever a census is taken, from other places. The State commissioner of education may specify what information in addition to that required by law shall be collected by school census enumerators.<sup>2</sup>

## METHODS OF SECURING EMPLOYMENT CERTIFICATES.

One kind of employment certificate only is issued to children between 14 and 16 years of age. Duplicate certificates, issued to children who have lost their certificates, are exact copies of the originals, and no special certificates are in use for work during vacations or for temporary work at any time. The division of employment certificates of the bureau of child hygiene in New York City also issues statements of age to children over 16 who present acceptable evidence. Employment certificates properly issued in one part of the State are legal, unless revoked, in any other part of the State until the owner is 16 years of age. A child may obtain his employment certificate either in the city, town, or village in which he lives or in that in which he is to be employed.<sup>3</sup>

No leaflet instructions with regard to securing certificates are issued in any place included in this study except in New York City and Rochester. In New York City the bureau of child hygiene of the department of health has published a 24-page pamphlet entitled "How to Obtain an Employment Certificate," which has been distributed to the school principals and which is given to parents and others at the employment-certificate office; in Rochester the health bureau issues a card containing general directions. In many of the schools in other cities special instruction is given as to the necessary requirements and procedure.

During the regular school year little difficulty is encountered in securing school records, but various provisions are made for obtaining

<sup>1</sup> Labor Law, secs. 75 and 166. For the text of these sections see pp. 122, 124.

<sup>2</sup> Education Law, secs. 650-652. For the text of these sections see pp. 129, 130.

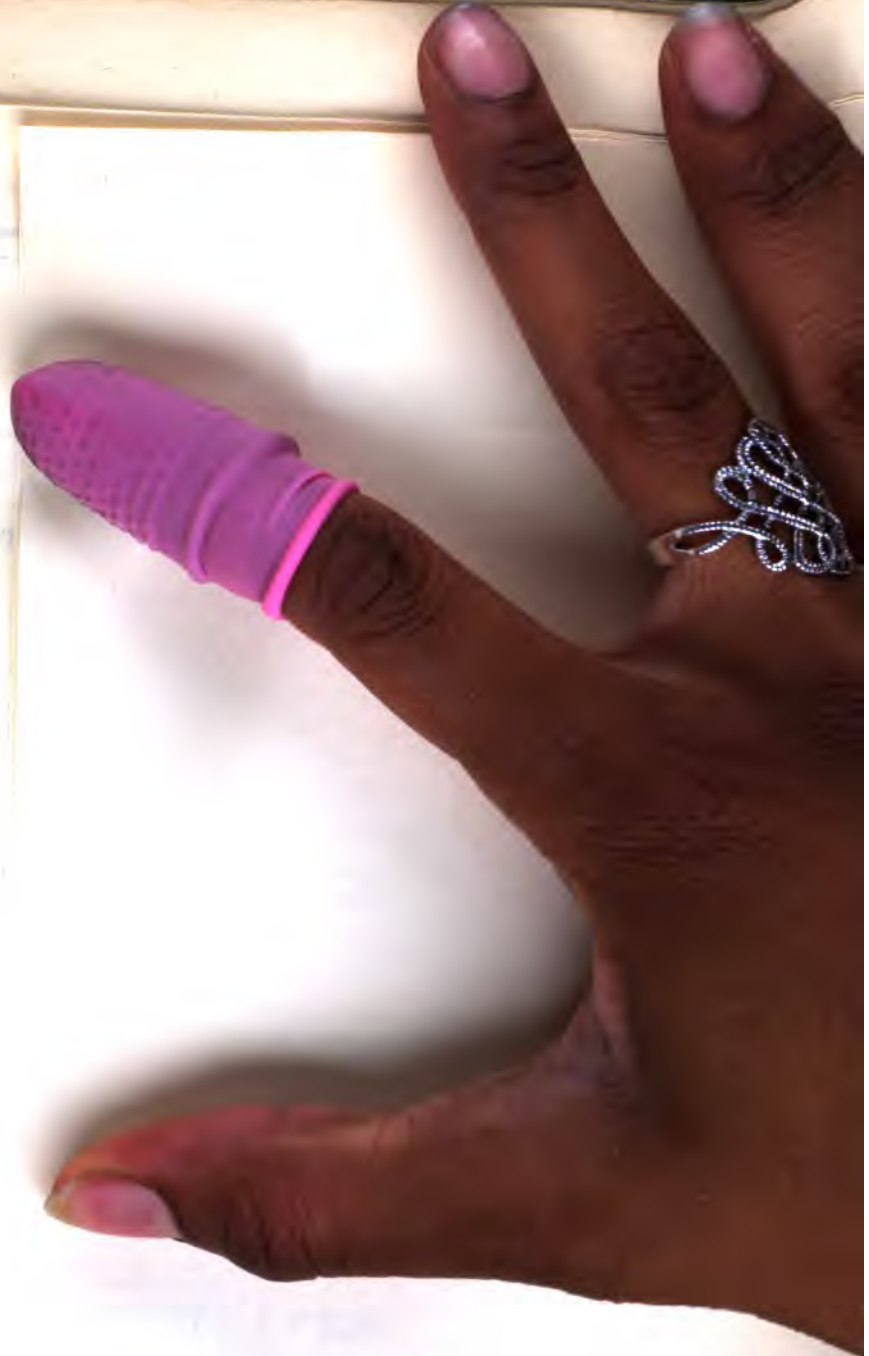
<sup>3</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

them during vacation. In many schools in New York City and in Buffalo instructions for obtaining employment certificates during vacation are given at the close of the year. Children who desire school records and are entitled to them must get them before school closes or take the risk of not being able to find their principals during the summer. In Rochester instructions with regard to securing records during vacation are given all public-school children at the close of school. These records are filled in completely, except the date, for all children wishing them who have complied with the educational requirements and are of working age or will become so before September. They are kept in the office of the efficiency bureau. When a child entitled to one calls for it at that office, it is dated and given to him. The parochial-school child, on the other hand, must find the chief executive officer of his school in order to get a school record, if he has not secured one before vacation. In Troy, Little Falls, and Tonawanda, where the duplicate records are in the superintendent's office, which is open during the entire year, children have no difficulty in securing school records during the summer months. In the other places visited, however, unless children procure them before school closes they must depend on the chance of finding their principals later.

The issuing offices throughout the State are open so that children may obtain certificates at any time during the year. In New York City all the borough offices at which employment certificates are issued are centrally located, convenient to those districts from which large numbers of children go to work. In Buffalo and Rochester the issuing offices are also well located to accommodate children. In cities with 5,000 inhabitants or more, other than those of the first class, the superintendent of schools, according to law, must issue the school records; and in each of these cities visited, except Syracuse, the office of the board of health where certificates are issued is near that of the superintendent, often in the same building. In Syracuse the distance between the two offices is of no importance, as the school principals, instead of the superintendent, issue the records. In Victory Mills the physical examination is not given in the village where the certificate is issued but in the neighboring village of Schuylerville, about 1 mile distant.

#### REGULAR CERTIFICATES.

The legal requisites for obtaining an employment certificate are uniform throughout the State. They are (1) the application of the parent; (2) the presentation of satisfactory evidence of age and (3) of a school record showing fulfillment of the specified educational requirements; (4) the passing of a physical examination showing sound health and (5) of an educational test in the issuing office proving





literacy. Before the certificate is issued the issuing officer must approve the papers submitted and must sign a statement that the child is able to read and write simple sentences in the English language. The child must appear in person.<sup>1</sup> The law does not state how the parent must apply, and the procedure in this matter is not uniform. In some communities the parent's presence is required always; in others, only for certain purposes; and in still others it is never necessary. The evidence of age required in the order of preference specified in the law is a transcript of a birth certificate, a certificate of graduation, a passport or baptismal certificate, other documentary evidence, and in first-class cities a physicians' certificate of age.

*New York City, Manhattan Borough.*—In New York City when a child applies for an employment certificate he must be accompanied by his parent or by the representative of his parent and must bring with him two documents—evidence of age and a school record. A clerk at a desk near the entrance to the room examines these documents and instructs him what to do next. No application, however, is started unless some person in parental relation is present and satisfactory evidence of age is presented. At this first stage delay may be caused by the failure of the child to produce one or all of the requisites.

If a child comes unaccompanied by his parent and fails to bring any or all of the required documents, he writes his name and address on the white interview card.<sup>2</sup> The interviewer examines whatever documents the child has and, in order to make the office procedure easy when the child returns, notes on the card what requisites are missing or defective. The child is then sent away with instructions to bring his parent and the requisite documents. If the child states to the first interviewer that neither of his parents can come, he is sent to the chief clerk, who questions him more fully to ascertain positively whether neither father nor mother can appear. If he convinces the clerk of the truth of his statement, he is given a blank form<sup>3</sup> to take home for his parent to sign and acknowledge before some notary. On this form the parent declares that he is unable to accompany the child to the issuing office and appoints some one to appear and act in his place. If the child explains to the satisfaction of the clerk that his parents are both dead, or live in another country or State, he must bring some one to sign a sworn statement<sup>4</sup> to that effect and to act in place of a parent.<sup>5</sup>

<sup>1</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

<sup>2</sup> New York City Form 1, p. 138.

<sup>3</sup> New York City Form 2, p. 139.

<sup>4</sup> New York City Form 3, p. 139.

<sup>5</sup> Throughout the following discussion the word "parent" is used to mean anyone in parental relation to the child.

When a child presents satisfactory evidence of age, he and his parent must come together to the office. Thus if they appear without such evidence, they must both return with it unless the parent states that he has specific satisfactory evidence at home, when he is permitted to take oath and sign the application. The child then returns alone to the office and, if the evidence is as stated, it is accepted.

For a child born in New York City who comes without evidence of age this may be readily obtained, as he is sent across the hall to the bureau of records to secure a copy of his birth certificate, and, if his birth is recorded, he is there given a form<sup>1</sup> on which the date of birth is noted. If this date shows him to be over 14, the application is started; and if the school record is satisfactory, the entire procedure may be completed at once. If, on the other hand, his birth is not recorded, he is given at the bureau of records another form<sup>2</sup> to that effect and must return to the issuing office later with some other evidence of age acceptable under the law. A notation is made on the white interview card, so that when the child returns with such evidence the notes show what was done at the previous interview.

If the child appears without a school record but is accompanied by his parent and has satisfactory evidence of age, the application blank is started and, in order to avoid the necessity of the parent's returning to the office, his affidavit is taken at this time instead of after the child has fulfilled all the requirements. If the child states that he is in a low grade, nothing more can be done until the school record is produced. On the other hand, if the child states that he has finished the eighth grade or is in the high school, he goes through the entire procedure except that he does not receive his certificate until he has brought his school record. A child from a parochial school is given a school-record blank<sup>3</sup> to take to the chief executive officer of his school to be filled in; one from a public school gets a similar blank, filled in on application, at his school.<sup>4</sup>

Delays in securing a certificate are thus caused and return trips made necessary by failure on the child's part to appear with the requisites. Delay or refusal may be caused also by the presentation of documents which are not satisfactory. For instance, a child born in a country or State which issues copies of birth certificates may present as evidence of age a certificate of graduation or a baptismal record. If a birth certificate is procurable, the child and his parent must return at a later date with this certificate. But if it can not be secured the evidence first presented may be accepted. The school record may also be unsatisfactory, usually because it does not

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<sup>1</sup> New York City Form 4, p. 139.

<sup>2</sup> New York City Form 5, p. 139.

<sup>3</sup> New York City Form 6, p. 140.

<sup>4</sup> New York City Form 7, p. 140.

show the number of days the child has attended school. In this case the child's name and address are taken on the interview card for future reference, and he is sent to his principal to have the blank properly filled in.

If, however, the documents presented by the child are satisfactory and a birth certificate, a certificate of graduation, a passport, or a baptismal certificate has been accepted as evidence of age, the first interviewer fills in the application blank,<sup>1</sup> with the exception of the signature of the issuing officer and that of the medical officer, and stamps on it the kind of evidence submitted. He then administers an oath to the parent, who swears that the child is of the age specified and that he or she is the parent. The interviewer also transcribes on the form appropriate to such evidence of age the contents of the document, and both the parent and the child sign the application blank in the specified places.

The school record and the documents proving the child's age are then fastened to the application blank and given to the child to take to the physician in the examining room.

If for any reason the child does not pass the physician's examination, he is sent to the office of the borough chief, where he is examined by that officer or by the assistant chief. If the examining officer agrees with the first physician, he marks the examination sheet "R," in red ink, and signs it and also the application blank. In case he does not agree, he signs both blanks as before but does not put "R" on the examination sheet and the child may secure his certificate. In questionable cases, therefore, the decision in regard to the child's physical fitness to work does not rest with the examining physician but with the borough chief.

As a result of the physical examination the child may be refused a certificate permanently, or, if the defect seems remediable, temporarily. The treatment of the child in either case is discussed later.<sup>2</sup> In the latter case the essential facts concerning the defect are noted on a special card<sup>3</sup> and placed in what is called a "tickler" file, which is kept on the desk for ready reference; the parent and child are given a notice of temporary refusal and are instructed how to have the defect corrected and when to return for reexamination; and the school principal is mailed a special notice explaining why the certificate is withheld, so that he may expect the child at school. If the child does not return to be reexamined, a card is sent requesting him to do so and setting another date. In case of repeated nonappearance, and in all cases of permanent refusal, a nurse is sent to ascertain whether the child has had the prescribed treatment. In case the child comes back to the issuing office with the defect corrected,

<sup>1</sup> New York City Form 8, p. 141.

<sup>2</sup> See pp. 49, 75.

<sup>3</sup> New York City Form 9, p. 142.

this fact is noted on his card and he goes through the rest of the procedure as if he had passed the physical examination at the earlier visit.

If the physical examination is satisfactorily passed, the examining physician signs the application blank and the physical-examination blank,<sup>1</sup> the two blanks are fastened together, and the child is sent to the chief clerk, who is the issuing officer. The clerk notes on the back of the application blank the child's height and weight as they appear on the medical-examination sheet, and dictates to the child a sentence from a Third Reader. If the child writes the sentence correctly, the clerk signs the certificate, stamps it with the date of issuance and the number, and delivers it to the child. If the child fails on the first sentence, he may try two more. If he writes 2 out of 3 or 3 out of 5 sentences correctly, he is passed; but if he can not do this his papers are sent to the director of the bureau of child hygiene, with the recommendation that he be refused. The director, after investigating the facts of the case, makes the final decision as to the granting or refusing of the certificate.

Children are refused certificates whenever cause for refusal occurs at any point during the procedure. A child may appear with his parent and either state that he is under 14 years of age or bring documentary evidence which shows that fact. A child may bring a school record showing either that he has attended school less than the 130 days required by law or that he is in the second half of the sixth grade or in a lower one. A child may fail to pass the physical examination, or at the very close of the procedure he may fail in the literacy test. For the under-age child the application blank is completely filled, and the parent is sworn in the regular way. The child is then refused a certificate, the parent is given a formal statement showing the cause of this refusal,<sup>2</sup> and the application blank and the refusal card<sup>3</sup> are stamped with the word "Refused" and also with the cause "Under age." In the other cases the procedure relating to the refusal of a certificate is the same, but the causes differ—"Insufficient tuition," if the child has not attended school a sufficient number of days or has not reached the specified grade; "Insufficient education," if he fails to pass the literacy test; or "Physical incapacity," if he fails to pass the physical examination.

When the child has to establish his age, either by documentary evidence other than a birth certificate, certificate of graduation, passport or baptismal certificate, or by a physician's certificate of age, the procedure differs somewhat from that outlined above, and the child is longer delayed before he receives his certificate. Before such evidence is accepted, indeed, the child may be obliged to make several visits to

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<sup>1</sup> See p. 43.

<sup>2</sup> New York City Form 10, see p. 142.

<sup>3</sup> New York City Form 11, see p. 142.



the issuing office in an effort to establish his age through one of the preferred documents. If this effort is unsuccessful he is referred by the first interviewer to the chief of the division, who advises him how to procure "other documentary evidence" or determines whether he must resort to the physicians' certificate.

When a child, after making every possible effort, is unable to bring one of the preferred documents but has other acceptable documentary evidence of age, this evidence is transcribed to a form called a "Board paper"<sup>1</sup> and the application blank is filled in. The child then goes through the physical examination and, up to the point of receiving his certificate, follows the same procedure as though he had brought other evidence. If the child passes all the tests successfully, the "Board paper," showing the documentary evidence of age presented, is filled out and signed by the issuing officer. Before the child receives his certificate, however, this evidence must be approved by the board of health, which usually meets every two weeks. Thus the child must wait from a few days to two weeks before he knows whether or not he is to receive a certificate. The child and parent are informed of the reason for delay, and the child is given a typewritten statement to take to the principal of his school, explaining that his application has been referred to the board of health and that he will be notified should the board decide to grant the certificate. If the board approves the evidence of age, a post-card notice is sent to the child telling him to call for his certificate on a specified day.

Every effort is made to secure other evidence before resort is had to the physicians' certificate of age. But if the child is apparently more than 14 years of age and no other evidence seems available, the parent may make a formal application for an employment certificate and a physicians' certificate of age.<sup>2</sup> The issuing officer fills out this form and administers an oath to the parent to the effect that other evidence of age can not be obtained, and both he and the parent sign the form. The regular application blank is then partly filled in and the child is given a statement to take to his principal explaining the delay. This statement informs the principal that 90 days from date the child will be notified to appear at the office for a physical examination to determine age, and that if in the opinion of the examining physicians he is at least 14 years of age the physicians' certificate of age will then be issued, and if he presents a school record showing him to be at least 14 years of age, and in the grade required by law, an employment certificate will be granted. At the end of 90 days, therefore, if meanwhile no better proof of age has been found, the child is notified to come again with his parent to the issuing office. Two physicians then examine him, and, if they agree, this evidence

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<sup>1</sup> New York City Form 12, see pp. 142, 143.

<sup>2</sup> New York City Form 13, see p. 144.

of age is accepted. If the two physicians disagree, however, a third physician examines the child, and any two concurring opinions are final. After the physicians' certificate has been accepted as evidence of age the parent's affidavit is taken and the child is tested for physical fitness and for literacy as are other applicants.

*New York City, other boroughs.*—The procedure in the different boroughs is now uniform; that in Manhattan is followed elsewhere in the city. When this investigation was begun, however, there were certain points of difference in matters of office detail. The Bronx office, for instance, took precautions to assure itself that a child applying for an employment certificate had not received one at some previous time. When a child applied he was asked his name, and the card catalogue was consulted. If the name was found, the child was told to write his name, address, and date of birth on a piece of paper, and, if his signature was the same as that in the files, he was not allowed to continue with the application. If his name was not found or if the signatures were not the same the application blank was marked "O. K." in the corner.

*Buffalo.*—The procedure in the Buffalo issuing office resembles closely that in the New York offices. But the register of births of all children born in Buffalo who are of certificate age is kept in the issuing office for ready reference. If an applicant's record of birth is in this register or if he submits a birth certificate, the application<sup>1</sup> provided on the school record is signed by the parent; in this case he need not come to the office. If other evidence is presented, the parent must come to the office to make affidavit. In case a certificate of graduation, a baptismal record, or a passport is accepted, the application signed by the parent is similar to that used in Manhattan. In case any other documentary evidence or a physicians' certificate of age is accepted, special application blanks,<sup>2</sup> on which the character of the evidence is noted, are used. The board of health meets frequently, and in case the evidence presented must have its approval the child is instructed when to return for his certificate.

At the first interview much information is noted on the school record. Such points as the date of birth, the character of the evidence of age, whether or not the child's birth is recorded in Buffalo, and the parents' birthplaces aid later in the examination. No matter what the school record states, the child is questioned as to the grade he is in; and if he has not entered the seventh grade, the procedure stops there and he is told to return to school. If the school record and the child's answers are satisfactory, he is required to read from some part of the Fifth Reader and to write a sentence from dictation.

<sup>1</sup> Buffalo Form 1, see p. 157.

<sup>2</sup> Buffalo Forms 2 and 3, see pp. 158-159.

If he can not do both to the satisfaction of the attendant, he is refused a certificate for insufficient education; but if he can, and if his evidence of age is acceptable, he is allowed to have the physical examination. If he passes this also, his school record is stamped "Approved" and he is sent to the clerk or attendant for his certificate. The child is asked where he is going to work, and a notation as to whether it is in a mercantile or a manufacturing establishment is made on a stub record. He then signs and receives the certificate.

The examining physician in charge of the office alone decides on physical fitness. If he thinks the child is not fit, the school-record and physical-examination blanks are stamped "Disapproved," with specific cause of disapproval, and the child is told why he can not get a certificate at that time. In cases needing treatment a notice is given to the parent, if present, or to the child to take to his parent. Whenever a child who has been refused a certificate for a physical defect returns with the defect corrected, the school-record and physical-examination blanks are stamped "Approved" and "Defect corrected" and the certificate is granted.

*Rochester.*—The child who applies for a certificate at the issuing office in Rochester is required to bring an additional card, namely, his health-record card, showing the results of his school physical examinations. This card is used to aid in substantiating the age of the child and in checking up the work of the medical inspectors. The nurse passes on the papers and makes part of the physical examination. The child is also asked if he has been promised employment; but whether he has or not he receives his certificate. A written promise of employment was first requested by the health officer in the spring of 1914, and such promise must be produced, when possible, before the certificate is issued. This promise, however, not being a legal requirement, can not be insisted upon.

When documentary evidence of age other than a birth certificate, certificate of graduation, baptismal certificate, or passport is presented the nurse approves it and administers the required oath to the parent, and the child is not delayed by waiting for the health bureau to act. When the child has to resort to a physicians' certificate of age, the parent's affidavit is taken at the second appearance, and the names of the two physicians making the examination are noted on the corner of the affidavit blank. This is the only case in which a parent is required to appear. No educational test is given unless the child appears illiterate or can not speak English.

*Other cities and villages.*—In second and third class cities the laws relating to employment certificates differ in some respects from those in first-class cities. Final resort to a physicians' certificate of age is not permitted, and if a child can not produce documentary evidence of age he can not legally procure an employment certificate.

The school record must be signed by the superintendent of schools instead of by the principal of the school the child attended.

In each of the second-class cities visited the clerk of the bureau of health passes upon the documents submitted by the child and issues the certificate. His signature, not that of the health officer, is on the employment certificate. The physician making the physical examination is regarded, indeed, as the examining physician and not as the issuing officer. In the third-class cities visited the health officer performs all the work attendant upon issuing and signs certificates.

When a child appears without necessary or satisfactory documents and is therefore unable to secure his certificate at once, his name and address are not taken. But in every issuing office visited the names of children under 14 years of age who apply are recorded and such children are counted among the number of refused applicants. In Little Falls the parent must always accompany the child to the office; in Troy, Syracuse, and Cohoes only when necessary to sign a sworn statement as to the child's age; and in Albany a boy's parent must appear for this purpose, and a girl's parent must in addition accompany her at the time of the physical examination. In Utica the parent must appear at some time during the procedure to sign the application blank.<sup>1</sup> In Tonawanda, on the other hand, he is not required to appear at any time.

No literacy test is given at the issuing office in any of these places. In Albany such a test was given at one time but was discontinued later. Inquiry is usually made at Albany as to the character of the child's work.

In all these cities except Syracuse the child is required to go first to the superintendent of schools to have his school record filled in, or approved if previously filled in by his school principal. In Syracuse the child is obliged to make an additional trip, as he must go to the issuing office to get the school-record blank for his school principal to fill in and then has to return with it to the issuing office. One trip to the issuing office suffices in most places, however, unless the child applies at other times than the office hours of the examining physician.

The health officer at Little Falls is the only one in any of these cities who asks for other documentary evidence of age and refuses to accept a parent's affidavit without supporting evidence. The child is not inconvenienced there, however, by waiting for action of the board of health, as the officer grants the certificate but can revoke it if the board decides later that the evidence is not satisfactory. Thus far the board has always affirmed the judgment of the health officer.

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<sup>1</sup> Utica Form 1, p. 163.

In Victory Mills the child has his school record filled in by the principal of the village school and goes with it to the clerk of the board of health, from whom he receives an affidavit blank. He takes this to his parent for the sworn signature; goes to the adjoining village of Schuylerville to be examined by the health officer; brings back to the clerk the duplicate copy of the physical examination blank; and, if everything is satisfactory, receives his certificate. Thus the child usually makes three trips, two to the clerk's office and one to the health officer in Schuylerville. Sometimes, however, he goes directly to the health officer with an affidavit and a school record, returning with all three papers to the clerk.

#### NUMBER AND FORM OF CERTIFICATES.

The contents of an employment certificate, as has already been noted, are specified in the law, and a model form<sup>1</sup> is provided by the State department of labor. In addition to conforming to the law this model has a statement concerning the physical examination and a note to the effect that the certificate is to be filed with the employer and surrendered to the child or to the person in parental relation when the child's employment ceases. Notices specifying the hours of labor in factories and mercantile establishments and calling attention to the section of the law relating to dangerous occupations for children are printed on the back of the form.

All places visited issue certificates based on this model except Victory Mills, where an old triplicate form in use before the law was changed in 1913 is used. Certificates in the old form are made out either for a factory or for a mercantile establishment, and under the old law they could not be used in any other kind of an establishment than that specified. In New York City the form differs from the model<sup>2</sup> in providing for distinguishing physical instead of facial marks and has additional spaces for the address and sex of the child. These data are meant to aid in identification in cases where confusion might arise on account of foreign names. Of 23 cities, other than those visited, from which certificates were obtained all but 2 use forms based on the model, and these 2 use the old triplicate form.

Though the law provides for only one copy of an employment certificate, the number varies. In New York City, Buffalo, and Utica only one copy is made out, but in the last two cities stub records of the essential facts shown on the certificate are kept for use in case it is necessary to make a duplicate. In Rochester, Albany, Troy, Little Falls, and Tonawanda certificates are made out in duplicate, one copy being given to the child and the other filed in the office. In Syracuse and Victory Mills three copies are made; one of these is given to the child, one is retained at the office, and one is sent to the office of the State industrial commission.

<sup>1</sup> Form 2a, pp. 134, 135.

<sup>2</sup> Form 2b, p. 135.

**VACATION AND TEMPORARY CERTIFICATES.**

No vacation or temporary certificates are issued in New York State. If a child wishes to work during vacation, before or after school hours, or on Saturdays, he must comply with the same requirements as though he intended to leave school permanently to go to work. Furthermore, a child is not allowed to work while waiting for acceptable evidence of age.

**LOST CERTIFICATES.**

The law makes no provision for an additional certificate in case the original is lost; but in the cities visited the issuing officer gives the child a duplicate which, except in Buffalo,<sup>1</sup> is on exactly the same form as the original, though in New York City such duplicates are plainly stamped "Duplicate." In the New York City offices a fee of 50 cents is asked for a duplicate; the child must sign a form<sup>2</sup> setting forth the manner in which the first certificate was lost; and, according to a ruling of the department of health, the parent must accompany the child. This rule is generally adhered to, as it aids in assuring the issuing officer that the child has actually lost the old certificate and is not securing the new one for another child. Since early in 1915 the practice has been to require the child to wait at least one month before a new certificate is issued. When assurance is given, usually by a note, that the employer lost the certificate, the parent need not accompany the child, and a new certificate is issued at once. In such a case the employer, informed by the issuing officer of the required fee, often pays it, but if he does not, the child must do so. Occasionally, when the imposition of the fee seems an injustice, the duplicate is given to the child free of cost. In New York City 1,555 duplicate certificates were issued in 1915.

In Buffalo, when the child wishes a duplicate certificate, he must come to the issuing office accompanied by his parent. The stub of the original certificate is consulted for the necessary data and the parent is required to swear as to the manner in which the certificate was lost. A fee of \$1 is charged, and an attempt is made here also to persuade the employer, if he lost the original, to pay for the duplicate copy; but if he will not the child must do so. In Rochester the child must apply in person and be reexamined, chiefly for defective teeth. No fee is charged, but the child is usually required to wait a week for the copy. If, however, the child brings a note from an employer stating that he has lost the original certificate or that he intends to employ the child, the duplicate is granted immediately.

In none of the other cities visited is any fee required, but the child is sometimes questioned and required to return a second time for the

<sup>1</sup> Buffalo Form 4, pp. 159, 160.

<sup>2</sup> New York City Form 14, p. 145.

duplicate certificate. At the Utica office, if the child says that the employer lost the original certificate, he must bring a written statement from the employer to that effect before the duplicate is issued.

#### OVER-AGE CERTIFICATES.

In New York City the bureau of child hygiene of the department of health issues to a child over 16 years of age a statement<sup>1</sup> certifying that his proof of age has been investigated and is satisfactory. This statement is also issued to a child who claims to be over 16 but who can not present satisfactory proof of age, providing a physical examination made by a physician of the bureau indicates that he is over 16. It is frequently issued upon the request of an employer, and a child can not procure a second copy.

Until October 1, 1915, in New York City the department of labor issued to a child over 16 years of age a statement certifying that evidence satisfactory under the law for an employment certificate was filed in the office showing that the child was over 16 years of age. This statement was also issued upon the request of an employer, and a child could not procure a second copy.

#### EVIDENCE OF AGE.

Any one of four kinds of documents may be used by a child to prove his age to an issuing officer in New York State. In order of preference these are as follows:

- (a) A duly attested transcript of a birth certificate.
  - (b) A certificate of graduation from the eighth grade, provided the school record shows that the child is at least 14.
  - (c) A passport or a duly attested transcript of a baptismal certificate showing the date of birth.
  - (d) Other satisfactory documentary evidence of age.
- A fifth document may be presented in first-class cities only, namely:
- (e) A physicians' certificate of age based on a physical examination.

When evidence other than a birth certificate is presented the parent, according to law, must appear in person before the officer issuing the certificate and must file an affidavit stating that other evidence can not be secured. For this affidavit no fee can be collected at the issuing office.<sup>2</sup>

To prevent effacement, the date of birth is perforated on the employment certificate in Buffalo and in Rochester. In the other offices it is written.

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<sup>1</sup> New York City Form 15, p. 145.

<sup>2</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

In New York City and in Buffalo the order of presentation prescribed in the law is strictly observed. In Rochester birth certificates, baptismal records, and passports are regarded as equally acceptable, and a certificate of graduation is accepted not only if the child's birth is not recorded but also if the record is difficult to obtain. In the second-class cities—Albany, Troy, Syracuse, and Utica—the birth certificate is first demanded, then the baptismal record or passport. In the absence of both these kinds of evidence the parent is required to swear before the commissioner of deeds or designated officer in the bureau that the child is of a certain age and that no other proof of age can be obtained. This parent's affidavit is frequently accepted without any supporting evidence. In Little Falls the proofs of age are required usually in the following order: Birth certificate, baptismal record, and parent's affidavit accompanied by other documentary proof. In Tonawanda the birth certificate is preferred, then the baptismal record; but occasionally some other document is accepted. In Cohoes and Victory Mills no special order of presentation is observed, but a parent's affidavit unsupported by any other document is the usual evidence.

Outside the first-class cities none of the offices visited demanded the certificate of graduation, and in none of them were the officers at the time of this investigation cognizant that such a certificate was acceptable as evidence of age.

#### TRANSCRIPT OF BIRTH CERTIFICATE.

*Native-born children.*—A law providing for compulsory birth registration has existed in New York State since 1853 but has not been effectively enforced until recently. In 1900, it was estimated, only about 78 per cent of the births were recorded, but in 1914 the State department of health claimed 99 per cent. A new law, effective January 1, 1914, gave the State commissioner of health power to remove local registrars and to prosecute local violators of the law. This law, it is claimed, will for the first time guarantee birth registration in the State. New York City, however, has always had a law different from that of the State and has enforced birth registration since 1909. In 1900 between 85 and 90 per cent of the births were registered, and the office of the registrar of vital statistics claims to get 99 per cent at the present time. Obviously, therefore, the child born in New York State who applies for an employment certificate can not yet be assured that the record of his birth will be on file.

The law requires "a duly attested transcript of the birth certificate." This does not necessarily mean the certified copy for which registrars may charge a fee of \$1.<sup>1</sup> No provision is made for searching the rec-

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<sup>1</sup> Consolidated Laws 1909, ch. 45, art. 20, sec. 391, as added by Acts of 1913, ch. 69.



ords, but in none of the cities visited was a fee charged for doing so when the date of birth was wanted for school registration or for employment. The registrars in some places, however, are not willing to consult the records for such purposes and often, therefore, other evidence of age is accepted by the issuing officers. In New York City, Buffalo, and Rochester, when a request is received for the date of birth of a child born in the city, the information is furnished free to a child between 14 and 16, and in Rochester also to a 16-year old child who states that he wants it to prove his age to an employer.

In New York City a register of the births of all children born in Greater New York is kept in every borough office, and when such a child applies for a transcript it can be easily ascertained whether his birth is recorded. In Buffalo, Rochester, all the second-class cities visited, and Tonawanda the birth records are in the offices where certificates are issued, and for a child born in one of these cities the records are always consulted before other age evidence is accepted. In Little Falls, Cohoes, and Victory Mills the clerks of the boards of health have the birth certificates, but as they are also engaged in other business such records often are not consulted.

In Buffalo and Albany, if the name on the register differs from that on the school record or from the one the child gives, the parent must make a sworn statement before the commissioner of deeds that the two names are those of the same child.

In proving the age of a child born elsewhere in the United States difficulties are encountered, although the child is not greatly inconvenienced. Often, it is true, his birth certificate can not be obtained, but the answer to his request for one is soon forthcoming and other evidence can usually be secured. The Buffalo office instructs the child who claims to have received no reply to a request for a transcript of his birth certificate to send a special-delivery letter. If such a letter is returned, it is filed in the office and accepted as proof that the record does not exist. The office does not accept other evidence of age until it has written proof that a transcript of the birth certificate can not be obtained.

In Manhattan Borough, during the year 1913, 11,221 out of 14,367 native-born children receiving certificates, or 78 per cent, presented transcripts of birth certificates as evidence of age.

*Foreign-born children.*—Before the beginning of the European war a foreign-born child, in some offices, was required to present if possible a transcript of a foreign birth certificate. In case he did not have one he was compelled to send for one, and a long delay often occurred before it was received. Meanwhile the child was obliged to stay in school. In New York City, even since the beginning of the European war, such transcripts have frequently been demanded from

children born in countries not considered to be too seriously affected either by the war itself or by the resulting irregularity in the mails; but the practice has become less common as the war has continued.

Foreign-born children applying for employment certificates in New York City, Buffalo, and Tonawanda were always required to secure if possible copies of their birth certificates. Occasionally also they were required to do so in Rochester, Albany, and Syracuse, but never in Troy, Utica, Cohoes, Little Falls, or Victory Mills. Instructions were always given in regard to securing such certificates in New York City and Buffalo; rarely in Albany and Syracuse, and never in Rochester and Tonawanda.

The New York City office kept thoroughly informed of conditions in European countries which affected birth registration, and when a child claimed to have been born in a foreign city where birth certificates had been destroyed he was instructed what other evidence to bring. On the other hand, a child born where birth certificates were available was given a printed slip made out for the particular country of his birth and was instructed to fill it in and send it, together with the necessary fee—the amount of which was specified—to the proper official, whose exact title and address were given him.<sup>1</sup> The parent was instructed to send a registered letter and to keep the receipt in order to present it if no reply were received. At times a parent or child wrote to a relative or friend in the home country, asking him to secure the birth certificate. A letter received from such a person, stating that the birth certificate could not be obtained, was generally accepted, but in some suspicious cases the parent was required to write, as previously instructed, to the proper person. When such evidence was received, the office transcribed the essential facts on a special form<sup>2</sup> and returned the original paper to the child. Special difficulty was experienced with the Jewish child whose birth often was not recorded or whose certificate was difficult to obtain. In parts of some countries the births of Jewish children are recorded as illegitimate because the parents were married and the children born outside the State religion; their parents, consequently, often objected to procuring these records; and at times the office did not insist, but accepted other evidence.

At the Manhattan office 5,733 foreign-born children received certificates in 1913; 3,639, or 64 per cent of them, presented birth certificates as evidence of age; 543, or 9 per cent, graduation certificates; 403, or 7 per cent, baptismal records or passports; 972, or 17 per cent, other documentary evidence; and 176, or 3 per cent, had to resort to physicians' certificates of age.

<sup>1</sup> For this purpose the pamphlet of instructions, *How to Obtain Foreign Birth Certificates*, issued by the New York Child Labor Committee, was constantly used.

<sup>2</sup> New York City Form 16, p. 145.

In Buffalo, when a child was instructed to write for a copy of his birth certificate, he had to return with the copy or with a letter stating that the birth was not recorded. He was not instructed to keep the receipt to show, in case he received no reply, that he had actually written, for he was required to write again and again until he received a reply. Otherwise he could not get a certificate.

In Rochester the child or parent was simply told to write for a transcript of the birth certificate. A statement of the date of birth was accepted when written on a plain piece of paper if signed by the proper official.

In Albany and Syracuse, if a child came to the office with a baptismal record or passport, the document was usually accepted and the child was not directed to write for a transcript of his birth certificate. In Utica and Troy the issuing officers had no knowledge of the countries from which birth certificates could be secured, and consequently a child's statement regarding his ability to secure such a paper was accepted; in Little Falls, Cohoes, and Victory Mills, even though the officers had such knowledge, the child was not required to procure a transcript of his birth certificate. In Tonawanda the health officer usually knew whether a child had written for his certificate and accepted his word about the reply.

In Manhattan and Brooklyn Boroughs, where most of the foreign-born children apply, there was, until early in 1915, some one in the office to translate documents, and in the other boroughs the chief of the division was called upon for this purpose. In other places, unless the foreign document was easily translated, the issuing officers depended upon a translation by a priest, a notary, or sometimes the child.

#### CERTIFICATE OF GRADUATION.

The second evidence of age to be accepted is the grammar-school certificate of graduation. To make such evidence acceptable proof of age it must be accompanied by a school record showing the child to be at least 14 years of age. The provision really means, therefore, that the evidence of age presented and accepted is that appearing on the records of the school the child has attended. Of the 20,100 certificates issued in Manhattan in 1913, 1,084, or 5 per cent, were granted on this evidence of age. It is interesting to note that 9 per cent of the foreign-born children, but only 4 per cent of the native children, presented this evidence. If a diploma is acceptable, its contents are transcribed in the New York City offices to a regular form.<sup>1</sup> In Buffalo a note of the kind of evidence produced is made on the application blank.

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<sup>1</sup> New York City Form 17, p. 143.

In Rochester, if a child comes without his diploma, he is not required to return for it providing the school record shows that he has finished the eighth grade.

#### PASSPORT OR BAPTISMAL CERTIFICATE.

A passport or baptismal certificate is the third choice as evidence of age under the law. In New York City, when instructions are given to a foreign-born child how to proceed in securing a birth certificate, additional instructions are usually given with regard to the passport or baptismal record in case the birth certificate can not be obtained. The evidence from a passport is copied on the same form as that used for a birth certificate. A transcript of a baptismal certificate must be signed by the pastor or priest and the seal of the church must be attached. The evidence on it is transcribed in the certificate office to a special form.<sup>1</sup> In Manhattan Borough 2,316 children who received certificates in 1913 proved their ages by baptismal certificates or passports. The majority of these children were native born; consequently more baptismal certificates than passports were accepted.

In Buffalo, when a baptismal record is accepted, it is retained in the office if not too cumbersome; otherwise it is transcribed to a form similar to that used in New York City. At the Rochester office a baptismal record, even when written on a plain piece of paper with no church seal attached, is customarily accepted from a child unless his birth is registered in the city; and a passport is commonly accepted from a foreign-born child.

In the second-class cities visited this evidence—a baptismal certificate or passport—is accepted if presented by a child born elsewhere than in the city or by a child born in the city whose birth is not recorded. In Albany a copy is made of the certificate, but in the other places the original evidence is kept on file. In Little Falls, where most of the applicants are Catholics, a baptismal certificate is the usual evidence of age presented and accepted. In Cohoes, also, most of the applicants are Catholics, and baptismal certificates would be easily obtainable; but they are rarely demanded and are accepted only if they bear the seal of the church and are accompanied by the sworn statement of the parent. In Tonawanda, if the applicant can get neither a birth nor a baptismal certificate, he can not obtain an employment certificate.

#### OTHER DOCUMENTARY EVIDENCE OF AGE.

Under the law the issuing officer is himself permitted to accept the different kinds of evidence of age thus far discussed. For the acceptance of any other documentary evidence of age the approval of

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<sup>1</sup> New York City Form 18, p. 146.

the board of health is required. If a birth certificate, graduation certificate, passport, or baptismal certificate can not be produced, but if other documentary evidence of age satisfactory to the issuing officer is available, the issuing officer must present to the board of health a signed statement showing the facts, together with the evidence of age produced, and the board of health, at a regular meeting, may by resolution provide for receiving such evidence as it approves.<sup>1</sup>

Before other documentary evidence of age is accepted in New York City the child is required to furnish documentary proof that a birth certificate or certificate of graduation is not obtainable; but his statement is usually accepted regarding his inability to procure a baptismal certificate or passport, because the child, it is believed, will bring such evidence rather than wait unnecessarily while the board of health passes on the "other documentary evidence" of age.

Certain kinds of documentary evidence of age have been presented and accepted in one office and other kinds in another. But in any of these offices any proof of this sort which a child might present, if considered authentic, would be accepted. A life insurance policy is usually considered the best and is accepted in all the first-class cities, as is also a Bible record which appears to have been made near the time of the child's birth. A Jewish barmizvah paper<sup>2</sup> is accepted in New York City but not in Rochester; and at the time of this investigation such evidence had never been offered in Buffalo. The census age certificate<sup>3</sup> from the bureau of attendance, though by some considered of doubtful value as documentary evidence of age, is frequently used in New York City. No similar records, however, are in use in Buffalo or Rochester. Vaccination certificates, if official and not from private doctors, are accepted in New York City. But such certificates are not accepted in any of the other offices visited except in Rochester. The New York City offices have accepted a certificate from the United States Immigration Bureau, a hospital record, a statement of age from the children's court, and the date of birth on a christening cup. The Buffalo office has accepted a record of the Catholic Orphan Asylum, and the Rochester office accepts any authentic statement regarding a child's age—for example, an old letter written at the time of the child's birth to an aunt and showing the exact birthday.

Of the 20,100 certificates issued in Manhattan in the year 1913, 1,529 were issued on some sort of documentary evidence of age other than a birth or baptismal certificate, certificate of graduation, or

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<sup>1</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

<sup>2</sup> New York City Form 19, p. 146.

<sup>3</sup> New York City Form 20, p. 146. When a child applies for a census age certificate and no record of his age is found on file he is given a yellow card stating that fact.

passport. This evidence was accepted from 17 per cent of the foreign-born children receiving certificates as against 4 per cent of the native born. In Buffalo, from October 1, 1913, to September 1, 1914, only 20 children had to bring other documentary evidence of age.

The board of health in New York City has always approved the evidence of age accepted at the issuing office, but the board in Buffalo has not done so in every case. In Rochester, as already shown, other documentary evidence of age is not submitted to the board of health but is approved by the nurse.

In Little Falls the health officer accepts from the school principal a statement of the number of years a child has attended school and of the age at entrance. On the strength of this statement the parent's affidavit is accepted and the certificate is issued. After issuance the officer submits the facts to the board of health. Thus far the board has not disapproved the issuance of any certificate, but it is said that if it should do so the certificate would be revoked.

#### PHYSICIANS' CERTIFICATE OF AGE.

In cities of the first class—but nowhere else—in case no satisfactory documentary evidence of age can be produced for a child who is apparently at least 14 years of age, the law provides that the issuing officer may receive an application signed by the parent for a physicians' certificate of age. In order to allow ample time for "an examination to be made of the statements contained" in the application, and also probably in order to discourage the use of this evidence of age except as a genuine last resort, the law provides that the application must remain on file for at least 90 days before the examination is made. In case "no facts appear within such period or by such examination tending to discredit or contradict any material statement of such application," the issuing officer may direct the child to appear for examination before two officially designated physicians, and if these two physicians agree that the child is at least 14 years of age their written certificate to that effect must be accepted as sufficient proof of age. If the two physicians disagree, the child must be examined by a third physician and the concurring opinions decide the age of the child.<sup>1</sup>

This last resort under the law is unsatisfactory, and it is important that every means of proving age by documents be exhausted before it is resorted to. The parents, considering that the long delay of 90 days during which the child must stay in school is a hardship, usually present, if possible, some other evidence of age.

This examination to determine age is never made unless the child appears to be over 14. Its exact nature could not be ascertained,

<sup>1</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

but the physicians state that it is different from that for determining physical fitness to go to work.

In Manhattan Borough, during the year 1913, only 211 certificates were issued on physicians' certificates of age, most of them to foreign-born children. This evidence is rarely resorted to in the other boroughs.

In Buffalo physicians' certificates of age have been resorted to only occasionally. The board of health always approves such evidence before it is finally accepted. As in New York City, this certificate is based on the judgment of two physicians in the employ of the board of health. In Rochester, when a physicians' certificate of age is accepted, the parent's affidavit form <sup>1</sup> is used and the necessary data are written on the back of the form.

#### PARENT'S AFFIDAVIT.

Under the law a parent's affidavit must accompany all evidence of age except a birth certificate. The practice differs widely, and the Buffalo office was the only one visited in which the requirements of the law were strictly adhered to. In New York City the affidavit accompanies all evidence of age, but in Rochester only other documentary evidence or a physicians' certificate of age. In Cohoes the sworn statement of the parent must accompany the baptismal record, a requirement in no other second or third class city visited.

A parent's affidavit of age unsupported by documents to prove a child's age is not provided for in the New York labor law unless such an affidavit is considered "satisfactory documentary evidence." Nevertheless, such affidavits are commonly accepted in Albany, Troy, Utica, and Syracuse. They must be taken, however, before the notary in the issuing office. In Cohoes and Victory Mills, almost without exception, the parent's sworn statement of age is the only proof demanded. In Cohoes this statement must be made before the clerk of the board of health; in Victory Mills the affidavit, for which the parent must pay a fee, may be taken before any notary. In Little Falls an unsupported affidavit is never accepted.

The forms used for affidavits are similar throughout the State.

#### DISPOSITION OF DOCUMENTS.

All original evidence of age presented in New York City is given back to the child after it has been stamped to show that it has been once used at the issuing office. This stamp, it is believed, prevents future use of the same evidence by another child. Returned documents are not stamped in any other place visited in the State, nor is there any uniformity about returning evidence. In Buffalo tran-

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<sup>1</sup> Rochester Form 1, p. 161.

scripts of birth certificates, passports, certificates of graduation, and baptismal certificates—except those convenient for filing—are returned to the children. Other documentary evidence is filed in the office. In Rochester birth and baptismal certificates and passports are sometimes returned to the child and sometimes filed in the office, but certificates of graduation and other documentary evidence are always returned to the child. At Albany and Little Falls all original evidence except a transcript of a birth certificate is returned. In the other places visited all original evidence is filed in the issuing office.

### PHYSICAL REQUIREMENTS.

The physical requirements for an employment certificate are specified in the labor law only in a general way. Provision is made that the issuing officer shall sign and file in his office a statement that the child making application for an employment certificate is "in sound health and physically able to perform the work which it intends to do," and also that "in every case, before an employment certificate is issued, such physical fitness shall be determined by a medical officer of the department or board of health, who shall make a thorough physical examination of the child and record the result thereof on a blank to be furnished for the purpose by the State commissioner of labor [industrial commission] and shall set forth thereon such facts concerning the physical condition and history of the child as the commissioner of labor [industrial commission] may require."<sup>1</sup> As health officers were reminded by the department of labor when this provision went into effect in 1913, it is a penal offense to issue an employment certificate to a child without first making a physical examination in accordance with the requirements of the blank prescribed by that department.<sup>2</sup>

The industrial commission, it will be seen, is given power to decide the essential points to be noted in a physical examination, and it may be inferred that if a child is sound in all particulars mentioned he will generally be considered physically fit to go to work. At any rate, the data demanded by the commission are those which the local examining physician must record, and the examination must be given with this end in view.

The form in use, filled out and with the points checked for a typical healthy child, is shown on the opposite page.

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<sup>1</sup> Labor Law, secs. 71 and 163. For the text of these sections see pp. 120, 124.

<sup>2</sup> Penal Law, sec. 1275. For the text of this section see p. 131.



[illegible]

**Duplicate of this record to be sent to Commissioner of Labor in every case.**

When the law went into effect, in 1913, the department of labor issued the following instructions, in addition to those on the form, as to the method to be adopted in making the various tests:<sup>1</sup>

*Eyesight.*—Use the Snellen test card. Ability to read the 20-foot section or test at a distance of 20 feet to be considered perfect. If child is unable to read the letters correctly at that distance, move him nearer, the distance to be shortened 2 feet at each test. Each eye to be tested separately, checking the number corresponding to the distance at which he reads the test correctly. In the illustration the "right" eye is checked at 16 and the "left" at 14.

*Hearing.*—Test each ear separately. Use an acoumeter (a simple instrument, costing \$1). Ability to hear the click of this instrument at 14 feet is to be regarded as perfect; lessen the distance (2 feet at a time) for those who can not hear, until they indicate their ability to count the number of clicks made by the tester. In our illustration above, the child is made to hear at a distance of 10 and 12 feet, respectively.

*Weight.*—Use accurate scales. Beware of efforts to increase weight by heavy substances in pockets or elsewhere about the person.

*Teeth.*—"Bad" should indicate marked decay.

*Pulse.*—To be taken at wrist, child sitting.

*Condition of pharynx—palate.*—Indicate in writing if tonsils are "hypertrophied," palate "cleft," or any other unusual or marked condition; if "normal," state that fact in writing.

*Hernia.*—Record should be based upon answers to inquiries, not on actual examination.

The industrial commission furnishes to every health officer a book of blank forms for recording the results of all physical examinations, whether resulting in the issuance or refusal of a certificate. In these books alternate blanks are perforated, and these perforated blanks must be filled out, by the use of a carbon sheet, as duplicates of the original record. All such duplicates must be sent, between the 1st and 10th of each month, to the office of the department of labor at Albany.<sup>2</sup>

#### PROCEDURE.

In describing the physical examinations given in the places visited, the points on the blank form will be followed and variations from them noted.

In the New York City office all points on the form are checked. The nurse assists the examining physician by filling out the blanks and by questioning the child concerning the date of vaccination and the parents' birthplaces. She also often weighs and measures him. For the average applicant the examination requires about 5 minutes, but for the child who has some physical defect which the physician thinks might unfit him for work the time varies. Special attention is given to children with heart trouble, and the bureau of

<sup>1</sup> Circular letter to health officers issued by the New York State Department of Labor, Sept. 30, 1913.

<sup>2</sup> Data from the physical examination blanks were used in a pamphlet entitled "Heights and Weights of New York City Children 14 to 16 Years of Age," by Dr. Lee K. Frankel and Dr. Louis J. Dublin, Metropolitan Life Insurance Co., New York, 1916. Similar data for the entire State have been compiled, and will soon be published, by the bureau of statistics and information of the industrial commission.

attendance, when notified of a refusal for this cause, endeavors to have special provision made for the child by the school principal, such as placing him in a class on the ground floor of the school building and seeing that he is not overstrained.

The examination in the other cities and towns visited resembles that in New York City and requires from 3 minutes in some places to 10 minutes in others. In Albany, Little Falls, Utica, Syracuse, Troy, and Cohoes about 5 minutes is required for the average applicant; in Rochester about 10 minutes; and in Buffalo and Victory Mills from 3 to 5 minutes.

In New York City and in Buffalo an attendant assists the physician during the examination. In Albany and Troy the clerk of the board of health checks up the points on the blank during the examination, but elsewhere the physician performs all the clerical work.

In all the offices visited a girl is examined in practically the same way as a boy. In New York City, however, the nurse or female attendant must be present during the entire examination; in Albany and Little Falls the girl's parent must be present.

The examination for the most part aims to determine the physical condition of the child. Physicians in Rochester, Albany, Little Falls, Cohoes, and Victory Mills ascertain, if possible, the character of work the child expects to do and make the examination with that in mind. The Albany physician cited an instance of an applicant who had no sight in one eye and defective vision in the other. The child was attending high school regularly and wanted to work at a newspaper stand after school hours. Ordinarily, the physician said, he would have refused the certificate, but for such a child, who wished to finish high school, he felt that the outdoor work would be desirable and granted the paper. In Little Falls, where most of the children go to work in the knitting mills, the physician thinks it is very important to make sure that the child has no physical defect which will be aggravated by that work. The health officer at Victory Mills stated that he watched particularly for any defect of the lungs, as he thought no child with lung trouble should be allowed to work in the cotton mills. In Rochester a child is sometimes required to be reexamined a few days after the first examination to see whether suspicious symptoms still exist or have disappeared.

In Rochester, in addition to the information required on the form, certain extra-legal points are ascertained from the child or from the parent. These points, which are recorded on the regular physical examination blank, include the father's and mother's occupations, or the family's source of support if the parents are dead; the number of children in the family under 14 years of age and the number older, and, if possible, the occupation of those over 14; whether the family owns, rents, or is buying a home; the children's diseases the child has

had before and after the age of 7. Although the facts which these questions bring out have considerable bearing on whether or not the child receives a certificate, still they can not legally be made the basis for refusal. But if they show, for example, that the child apparently does not need to go to work or that he wishes to stay in school, the certificate may be refused on some other ground.

### TESTS.

In the following descriptions the test used in New York City is given and is used as a basis for comparison of the tests used in the other offices visited. Evidently, however, the nature of the tests may vary from time to time.

*Eyes.*—In New York City the child's eyes are tested at a distance of 20 feet from Snellen's chart, each eye separately and then both together, as prescribed on the blank. In Rochester, Troy, Little Falls, Cohoes, and Tonawanda the test is much like that in New York. In Utica it is made at a distance of about 12 feet from the chart, the calculation being based on 12 feet, and the fifth line from the bottom is used. In Buffalo both eyes are tested at once at a distance of 15 feet from the chart, which is lighted by electricity; and in Albany, Syracuse, and Victory Mills the distance is about 16 feet. Lighting conditions differ, however, in the various offices. In New York City the eyelids are examined to detect trachoma or other serious eye diseases. In the other places no such examination is made unless the appearance of the eyes arouses suspicion.

*Ears.*—In New York City each ear is tested by an acoumeter. In Troy, Utica, and Albany a watch is used. In the other offices no special test is made, as it is believed that if the child can understand what is said in an ordinary tone of voice he can hear well enough to go to work. Special tests are made, however, in most places if anything peculiar is noted about a child's hearing.

*Oral cavity.*—In New York City the teeth and throat are examined at the same time, and enlarged glands are determined by external examination with the hands. In all the other offices visited the teeth and throat are examined in a similar manner. In New York City the test of breathing consists of closing each nostril in turn and either feeling the breath with the hand or listening to the breathing. In Buffalo, Albany, Syracuse, Troy, Utica, and Tonawanda the child is questioned or his general appearance is observed. In Rochester mouth breathing is detected by the shape of the nose and the condition of the throat. In Cohoes, Little Falls, and Victory Mills no test is made.

*Lungs and heart.*—In New York City the heart and the lungs are tested in front, according to instructions, with a stethoscope on the bare chest. During the examination the child is required to take

full breaths and sometimes to cough. At times the lungs are also examined in the back. In Cohoes the heart and lungs are tested as in New York City. In Utica both the front and back of the chest are bared and examined with a stethoscope. In the Bronx, when any indication of trouble with the lungs is found, the child's temperature is taken and if abnormal the child must return in a few days for another examination. In Little Falls and sometimes in Buffalo the physician does not use a stethoscope but places his ear on the chest over the clothing and listens. In Rochester the bare chest is tapped during the examination, and, if any abnormal resonance is found or if the child has a cough or imperfect expansion, the temperature is taken and the back as well as the front of the chest is examined with the stethoscope. Usually in Buffalo and always in Albany, Troy, Syracuse, Tonawanda, and Victory Mills the stethoscope examination is made through the clothing.

*Vaccination.*—In New York City the child is questioned concerning vaccination and the reply is simply noted on the blank. This is also done in Cohoes and Victory Mills. In Albany, Troy, and Utica, and usually in Buffalo, the child must show the scar, but in Rochester only if he is from a parochial school. In Syracuse, Little Falls, and Tonawanda the child is not questioned.

*Joints and spine.*—In New York City joint and spinal trouble are detected by feeling the joints, by running the fingers down the spine, and by observing the child's general carriage. This method is also used in Troy. In Buffalo the child is required to swing the arms and legs vigorously while walking. In Rochester he is questioned as to his ability to swim, and his general carriage is observed. In Albany the child must move arms and legs vigorously; in Utica, Cohoes, Tonawanda, and Victory Mills he is questioned regarding his joints; and in Syracuse his general carriage is observed.

*Hernia.*—In New York City boys are questioned regarding hernia. In every other office visited this point is omitted.

*Height and weight.*—The tentative minimum standard of height in New York City is 4 feet 8 inches; that of weight is 80 pounds. These standards are usually adhered to, for if a child falls below either of them and his muscular development is poor, or if he appears anemic, it is usually considered to indicate malnutrition, and he is held to be physically unfit to work.<sup>1</sup> In Buffalo, if a child is apparently in sound health, no standards of height and of weight are observed; nor are they in Rochester, if there is no other physical defect. No established standards of height or of weight exist in the other places visited.

<sup>1</sup> Not infrequently children put heavy articles in their clothing so as to raise themselves to the required weight. In the Manhattan office a small, apparently anemic boy, who had been previously refused because he was underweight, appeared wearing heavy boots and begged to be weighed with them on so that he might go to work.

*Other tests.*—The existence of anemia, goiter, clubbed or cyanotic fingers, and the presence of a contagious disease are watched for during the examination in every place visited.

#### CAUSES FOR REFUSAL OF CERTIFICATES.

In most of the issuing offices visited, if the physical examination reveals defects which appear to be remediable by proper treatment, the certificate is temporarily refused; that is, it is withheld until the child comes again to the office with the defect corrected. In every instance of a temporary refusal it may be assumed that, unless the defect is corrected, the child is permanently refused permission to work. Thus it may happen that in some places a certificate has never been permanently refused because no child has ever applied who had defects which could not be corrected.

For what physical defects any office, if actually confronted with the problem, might refuse a certificate can not be stated definitely, as certain defects may have come to the attention of one office but not of another. The standards and the emphasis placed upon particular defects differ, as might be expected, in the various offices of the State. As a matter of fact, children in New York City are temporarily refused certificates for signs of malnutrition as indicated by their falling below the standard of height or weight or by their anemic condition; for markedly defective eyes, ears, or teeth, greatly enlarged tonsils, contagious skin diseases, prominent glands, bronchitis, or serious physical deformity. No child ever has received a certificate who showed indications of tuberculosis or who had heart disease or trachoma.

In Buffalo certificates have been refused for pronounced adenoids, heart disease, tuberculosis, and orthopedic trouble which can be corrected.

In Rochester defective teeth are the most frequent cause for which children are refused certificates. No matter how slight the defect, it must be corrected and the teeth be put in sound condition before the certificate will be granted; and if a tooth which needs specific treatment is removed instead of being given such treatment, the child does not receive a certificate. The health officer insists that the teeth be in perfect condition, as he believes defective teeth have a very close relation to a child's general health. Indications of tuberculosis, heart murmurs without compensation, spinal curvature, or any other serious deformity, such as flat foot, must also be overcome before a certificate will be granted, and no child is given a certificate until he has been vaccinated.

In Albany certificates have been withheld from children who had defective vision, greatly enlarged tonsils, or a contagious disease, or

who had not been vaccinated. However, if the defect is of a kind that will not be aggravated by the work which the child proposes to do, the certificate may be granted. When any child comes to the bureau of health to be vaccinated he must be accompanied by his parent or guardian or must bring a written statement from one of them consenting to the vaccination. At Troy certificates have been refused for physical deformity, defective vision, Pott's disease, neglect or refusal to be vaccinated, indications of tuberculosis, and heart murmurs. In Syracuse certificates have been refused for defective vision and for failure to be vaccinated; in Utica for defective vision, adenoids, sore throat, or decidedly enlarged tonsils; and in Little Falls for defective vision and also for malnutrition, as work in mills, although not necessarily dangerous, is considered taxing enough to sap the vitality of a child who is not strong. In Cohoes certificates have been occasionally refused for defective vision, indications of tuberculosis, and physical deformities which would interfere with work; and in Tonawanda for weakness and anemia. In Victory Mills certificates have never been refused.

#### TREATMENT OF REFUSED CASES.

In New York City children who are refused certificates because of slight or serious physical defects are referred daily to the school nurses, who visit the homes to see that the children follow the treatment prescribed and who make regular reports. The nurse in the office also keeps a record of all such cases until the children return. Very anemic children are sometimes sent into the country by the department of health.

In Buffalo these children are placed in the care of school nurses, but no reports are made as to whether the child follows the prescribed treatment. Only when the child returns is a record made of the correction of a defect. When the parent or child claims to be too poor to secure treatment for defective vision or bad teeth, a note is given him to take to the free dispensary. Before treatment is given, all such children are reported by the dispensary to the overseer of the poor, who ascertains whether poverty actually exists.

In Rochester children with defective teeth may secure treatment at the free dental clinic, and if they return to the issuing office they are reexamined to see whether the special defect has been corrected.

In Little Falls and Tonawanda, when the health officer refuses a certificate to a child for any cause whatever, he notifies the superintendent of schools, so that the child may be returned to school. But neither in these two places nor in the remaining places visited is the child followed up to see that the treatment recommended for physical defects is actually received.

### PHYSICAL EXAMINATION IN FACTORIES.

Additional protection is thrown around a child between 14 and 16 years of age working in a factory by the provision that any such child shall submit to a physical examination whenever required by a medical inspector of the industrial commission. If a child refuses to submit to the examination, or if as a result of the examination he is found physically unfit to be employed in a factory, his employment certificate may be canceled. If the child later submits to the examination, or if on subsequent examination the physical defects are found to have been removed, his certificate may be restored to him and he may be allowed to work. The child's employer and the local board of health are notified both of the canceling and of the regranting of his certificate. When a certificate is canceled it must be delivered by the employer to an authorized representative of the industrial commission. The results of all physical examinations must be recorded on blanks furnished for that purpose by the industrial commission, and a special form has been devised for recording cases of children whose certificates have been revoked because of physical unfitness.<sup>1</sup>

The division of medical inspection has existed since 1909, when provision was made for at least three medical inspectors—one of whom should be a woman—and the section providing for the physical examination of minors in factories has been on the statute books since 1913. Up to November, 1915, however, very few inspections had been made for this purpose, and the law was practically a dead letter.

### EDUCATIONAL REQUIREMENTS.

The law specifies two educational requirements which must be met by a child in New York before he can procure an employment certificate. First he must secure a school record, and second he must pass a literacy test.

A school record, according to law, must "contain a statement certifying that the child has regularly attended the public schools or schools equivalent thereto, or parochial schools, for not less than 130 days during the 12 months next preceding his fourteenth birthday, or during the 12 months next preceding his application for such school record and is able to read and write simple sentences in the English language, and has received during such period instruction in reading, spelling, writing, English grammar and geography and is familiar with the fundamental operations of arithmetic up to and including fractions and has completed the work prescribed for

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<sup>1</sup> Labor Law, secs. 61 and 76-a. For the text of these sections see pp. 119, 123.



the first six years of the public elementary school or school equivalent thereto or parochial school from which such school record is issued."<sup>1</sup>

During the period of school attendance children must be given instruction in a public school or in some other place where reading, spelling, writing, arithmetic, English language, and geography are taught in English.<sup>2</sup> If a child is instructed elsewhere than at a public school, the law requires not only that the instruction shall "be at least substantially equivalent to the instruction given children of like age at the public school," but that the attendance shall be for at least as many hours a day and "no greater total amount of holidays or vacations shall be deducted from such attendance." Absences, moreover, may be allowed only upon the same excuses as would be permitted under "the general rules and practice" of the public schools.<sup>3</sup>

At the time of granting a certificate the issuing officer not only must see that the child has a school record properly filled out but must "sign and file in his office a statement that the child can read and legibly write simple sentences in the English language."<sup>4</sup>

#### SCHOOL RECORDS.

In cities of the first class the school record from a public school must be issued by the principal or chief executive officer of the school the child attended; in all other cities and school districts having a population of 5,000 or more and employing a superintendent of schools, by the superintendent; and in school districts having a smaller population, by the principal teacher of the school.<sup>5</sup> The granting of school records by parochial schools is not supervised except in the smaller cities, where it is in a measure under the supervision of the superintendent of the public schools, who issues the records upon the recommendation of the principals of these schools.

The school record, according to the compulsory education law, must be issued to a child who "after due investigation and examination" is found entitled to one, and, according to the same section of the law, it must be issued "on demand to a child entitled thereto or to the board or commissioner of health."<sup>6</sup> This latter provision occurs also in the labor law. All school records must give the date of birth and the residence of the child as shown on the records of the school, and also the name of his parent or guardian.<sup>6</sup>

<sup>1</sup> Labor Law, sec. 73. Education Law, sec. 630, subsec. 1, and Labor Law, sec. 165, contain practically the same provisions as Labor Law, sec. 73. For the text of these sections see pp. 122, 127, 124.

<sup>2</sup> Education Law, sec. 620. For the text of this section see p. 125.

<sup>3</sup> Education Law, sec. 623. For the text of this section see p. 126.

<sup>4</sup> Labor Law, sec. 71. For the text of this section see p. 120.

<sup>5</sup> Education Law, sec. 630, subsec. 2. For the text of this section see p. 128.

<sup>6</sup> Labor Law, secs. 73 and 165. For the text of these sections see pp. 122, 124.

### INTERPRETATION OF GRADE REQUIREMENTS.

Considerable perplexity exists throughout the State regarding the proper interpretation of the phrase, added to the law in October, 1913, which reads: "'\* \* \* has completed the work prescribed for the first six years of the public elementary school or school equivalent thereto, or parochial school from which such school record is issued.'"

In New York City the department of health has ruled that unless the child has been promoted to the seventh grade he has not completed the first six years of the elementary school. The superintendent of schools has acquiesced in this ruling and in addition, in order to secure greater uniformity in educational standards, requires that every public-school candidate for a working paper who has not completed at least the first half of the seventh grade must be examined by the school authorities as to his educational fitness for a school record. On the record used by parochial schools is printed the simple statement that the child has completed the first six years of school.

In Buffalo, although the record shows completion only of the sixth grade, the issuing officer does not grant a certificate unless the child states that he has passed the examination into the seventh. But when a child has spent two years in any grade he is considered by the school authorities to have finished the work of that grade and is promoted even though he can not pass the examination. In Albany, Syracuse, and Tonawanda, also, two years spent in the sixth grade is equivalent to passing an examination into the seventh.

In Rochester the department of public instruction considers ability to be promoted into a grade as evidence of completion of the one preceding, and two years' time in a grade is not the equivalent of completion, though a child who has spent two years in one grade may be placed in the one next above to see whether he can do the work. Pupils, however, who have not passed the examination into the seventh grade are sometimes granted school records. In Utica, Little Falls, and Victory Mills children are not supposed to be granted school records until they can pass the examination for promotion into the seventh grade.

In Cohoes and Troy a child is not required to have spent more than one year in the sixth grade to be eligible for a school record.

### EMPLOYMENT-CERTIFICATE CLASSES.

Special classes maintained solely to aid children to gain the essentials of a six years' course in school and thus to become eligible to receive employment certificates were found in some schools in New York City and in one school in Buffalo. Under the old law, which required an examination in certain subjects, such classes were common; in January, 1916, they were discontinued in New York City.

In some schools in New York City special classes, composed of foreign-born children 7 to 18 years of age, unable to speak English, are formed to give the children a better command of the language. As soon as possible, however, these children are transferred to regular classes and then promoted from grade to grade until they have completed the sixth-grade work, when they may be given employment certificates. At the time of this investigation at least one school still maintained a special class composed of employment-certificate candidates whenever enough backward children in the school at one time desired to go to work. What are called rapid advancement classes are also utilized for this purpose. In these classes only the branches usually considered essential are taught, and the work of three terms is done in two. These classes of any grade are theoretically made up of the bright, over-age pupils, mostly foreign born or from homes speaking foreign languages. In practice, however, a candidate for an employment certificate who may be backward in the second half of the regular sixth grade is sometimes put in one of these classes and drilled in the requisites for the special examination.

One of these rapid advancement classes, for example, in a school from which a great many children go to work, was composed in 1914 of about 25 boys, of whom 10 were candidates for employment certificates, 1 or 2 were high-grade defectives, and the others were over-age pupils who were above normal in mentality. Of the 10 candidates for employment certificates, 9 were foreign born and 1 was native born of foreign parentage; 9 were Hebrews, and 1 was an Italian; 8 were between 14 and 16 years of age, and 2 had become 16 since entering the class. The two latter boys were a little backward and had not taken the examination, but as it had not occurred to them that they could leave school until they had finished the sixth grade, and as the principal had not told them they were old enough to leave, the chances were they would stay till school closed. One boy was in the class because the proof of age he had presented had not been accepted, and he was waiting till the birth certificate for which he had written should arrive. He had passed the examination and was therefore not much interested in his studies. Two boys had failed in the last examination and were preparing for the next one. None of the boys had been in the class more than five weeks. The records of every boy, except one who had recently entered, were examined. Each boy had been in the second half of the sixth or the first half of the seventh grade; all the boys, with the exception of one or two recent immigrants, had spent at least a year in each previous grade; and those who had recently arrived in this country had skipped from the foreign class to a regular class in a few weeks. The branches in which extra drill was given were those required for the

special examination for employment certificates—arithmetic, English, writing, and grammar. In addition, history, geography, and phonics were added, the history and geography being combined to show the geography of historic places. Phonics was believed to be a particularly important study, and constant drill was maintained in all sorts of combinations of sounds. The 10 certificate candidates were drilled separately from the others in the class in all studies except penmanship.

Whether such help was given in a regular employment-certificate class or in a section of a rapid advancement class, its chief significance in New York City was that the child was being drilled in the essentials in order to pass the examination for an employment certificate.

In Buffalo a regular employment-certificate class, in which essentials only are taught, exists in one school in the Polish neighborhood, but instruction and special help are often given to individual children in other schools. Children from the first half of the fifth grade to the second half of the sixth are allowed to enter this class when the principal thinks that he can not persuade them to go through the regular grades and when the family seems to need their help. Children who are temporarily out of work are also put in this class. The discipline and requirements are particularly interesting. In the 12 months previous to receiving his school record the child must be present 130 whole days—half days are not added together to make whole days—though all these days need not have been spent in the employment-certificate class; and he must secure his birth certificate or other satisfactory evidence of age while in the class. At the end of each month he is given a test in every subject, and if his grade averages 90 per cent or above, and he has complied with the requirements of attendance and of age evidence, his name is put on the honor roll and he is granted a school record. At the end of the year a regular examination for completion of the second half of the sixth grade—not a special examination for this class—is given, and all those who pass, provided they have complied with the other requirements, are granted school records. An examination of records of children in this class showed that most of them were able to leave after a few months' time. Some children were put into this class, it was found, on the day they were 14 years of age; in some cases they were taken from the first half of the fifth grade and placed in the employment-certificate class without first being placed in the second half of the regular sixth grade as was done in New York City; yet it was probably more difficult to get out of this class than out of any class in New York City giving similar help. This class was recognized by the Buffalo department of education, but at the

issuing office of the department of health it was said that if a child stated he had been in this class he was not granted a certificate.

In Rochester, although children who can not fulfill regular requirements are "tried out" in other grades and special classes and are given assistance by teachers, no special classes exist for children desiring to go to work. And none of the smaller cities visited had such classes.

#### EXAMINATIONS FOR EMPLOYMENT CERTIFICATES.

The requirement that a child applying for an employment certificate who has attained only the first half of the seventh grade shall pass an examination before receiving a school record is a ruling of the superintendent of schools of New York City. No similar requirement exists in any other city visited. Justification for the requirement is found in the provision of the compulsory education law that the school record must be issued to an applicant when, after due investigation and examination, he shall be found entitled thereto. Examinations are held in each district every two weeks, at a school building designated by the district superintendent. The ruling requires that, though these examinations shall be conducted by the principal of the school where they are held, they shall be under the general direction of the district superintendent. The practice followed differs in the various schools. Often responsibility for conducting the examination is delegated by the principal to an assistant or to a teacher. Sometimes the lists of names and ratings of children are sent to the district superintendent, sometimes only the names, and sometimes no report whatever. Only rarely does he see the questions used.

The subjects to be included are: (a) The writing of a bill which includes some simple work in fractions, with multiplication and addition in the extensions; (b) the solving of three or four simple problems in business arithmetic; (c) a simple exercise in dictation; (d) oral reading from a Fourth Reader; and (e) the writing of an application for a position or some other form of letter writing.

The ruling regarding the scope of the examination was made when the requirement was completion of the first half of the fifth grade and when the law stated that the child must have a knowledge of certain branches. When the law was changed no change was made in this ruling. Consequently wide differences are found in the examinations given.<sup>1</sup> Some principals add other subjects. On the other hand, one examination omits the test in letter writing because, according to the principal, it is a fifth-grade, not a sixth-grade study; another test omits not only letter writing but the oral reading and the writing of a

<sup>1</sup> New York City Form 21, pp. 146, 147.

bill. One test is suited to a child who has just finished the sixth grade, another to a child in the first half of the fifth grade. These differences are due partly to the fact that the law does not require such an examination and the ruling does not state to what grade the examination shall be adapted. Needless to say, children taking examinations in the districts which give the fifth-grade test have high ratings and all pass, while in the districts giving a sixth-grade test, many children have low ratings and often have to try the examination several times.

#### CHILDREN'S RECORDS.

The pupils' record cards found in the office of the bureau of attendance of New York City furnished abundant material regarding the educational status of children leaving school to go to work, and were valuable for this study in so far as they showed the educational equipment with which a child may start to work or the protection with which the school surrounds the child before allowing him to work. A bureau of attendance record card covers a child's complete school history from the time he enters school until he leaves and shows such points as the dates of entrance and of promotions, the attendance, grades, standings, and conduct, for every half year of enrollment. Between three and four hundred of these cards were examined, the records being chosen from those of several schools in Manhattan Borough from which large numbers of children left school to go to work. Every child who received a school record was looked up in the files of the Manhattan issuing office to ascertain the lapse of time between the issuance of the school record and that of the certificate<sup>1</sup> and to see whether the grade on the record card corresponded to that on the school record presented at the certificate office.

An examination of these record cards showed the various methods by which children are enabled to comply with the technical requirements of the law. A child may be promoted rapidly when he nears the age of 14; he may be tried in special classes; the examination may be adapted to his ability; or his grades in the examination may be raised. The child whose record is shown<sup>2</sup> was put into a rapid advancement class at one time and into a special class at another. In the last year—the year before he became 14 years of age—he spent only two months in the second half of the sixth grade and was then promoted into the first half of the seventh grade. Another interesting record is that of a boy who had arrived recently from Austria. He was placed in a special class for foreign-born children and then tried in the first half of the seventh grade, where he stayed about a month before being put back into the foreigners' class. He left school before his sixteenth birthday and

<sup>1</sup> See pp. 103, 104.

<sup>2</sup> New York City Form 22, pp. 148, 149.

received a certificate. Another boy doing average work progressed through the grades of the public school up to the time of his promotion to the first half of the sixth grade, when he evidently became eager to go to work. He did not enter the second half of the regular sixth grade, but went directly into the rapid advancement class for that grade. The school record stated that he was in the first half of the seventh grade, but no results of the examination were shown. The certificate was issued March 4, 1914, and the boy was discharged from school March 9, 1914. Another child, who went directly from the second half of the fifth grade to the first half of the seventh grade, failed in her regular employment-certificate examination in April but in May presented herself for another special test, with a note from her principal in substance as follows: "My dear Miss ———: I am very anxious that ——— pass the examination to-day, as it is necessary that she go to work. She is rather a dull girl, and I hope you will do what you can for her. ———, Principal P. S. No.——." This girl, in a test adapted to completion of the second half of the fifth grade, failed in arithmetic, and received C in reading and spelling and B in dictation and letter writing. The examining teacher marked the child as failed, but the principal of the school in which the examination was held gave her passing marks. At the issuing office the school record showed: Arithmetic C, dictation B, English B, and reading B. Records were also found of children who had progressed regularly through school, or were hurried only just before leaving, who had failed in the special employment-certificate examination and yet had received certificates.

#### ATTENDANCE REQUIREMENTS.

The requirement that a child must have attended school regularly 130 days during the 12 months next preceding his fourteenth birthday or during the 12 months next preceding his application for a school record means that a child must have attended school all but about 30 school days of an ordinary nine-months session either during the year preceding his fourteenth birthday or during the year preceding the date of his application for a school record. In other words, he must have attended school regularly, allowing for absence due to illness, accident, and other ordinary causes of irregularity. Such attendance, however, need not necessarily have been in the New York City schools. A child from New Jersey, for example, who had attended the schools of that State the required length of time would be granted an employment certificate, provided, of course, he had finished the sixth grade and had met the other requirements. Though the law does not so state, it has been interpreted by the issuing office in New York City to mean that the child must apply for a certificate

as soon as he is given a school record. A group of 14-year old children, who at one time had complied with the grade and examination requirements in a certain New York City school, received school records and then by common agreement did not apply for certificates. The principal notified the department of health and asked that certificates be withheld. Several weeks later, when the children applied for certificates, they were refused on the ground that their period of attendance had not occurred "next preceding" the time of application for a certificate. The children were obliged to return to school to fulfill the requirement.

#### METHODS OF ISSUING SCHOOL RECORDS.

Wide differences exist in the advice given children with regard to going to work and in the methods of issuing school records. These differences are most evident in the first-class cities where each individual school principal determines the necessary procedure.

A recent survey by the Public Education Association<sup>1</sup> showed that in some New York City schools the principals believed that the matter of most importance in issuing a school record was to make sure that the parent was willing to have the child leave school, and often they took great pains to explain to the parent the significance of the change and attempted to persuade him to allow the child to remain in school. Before granting a record some principals caused a visit to be made to the home or required the parent to come to the school. One principal did not consult the parent at all, but was very careful to have the child secure proper evidence of age before going to the board of health. Still another principal took a personal interest in each child who presented himself for a school record and gave him a set of instructions designed to be helpful to him in going to work.

In another school the home of every child who had asked for a school record was visited, the parent interviewed, and an attempt made to find some way to keep the child in school. If it was decided that the child must go to work, instructions were given as to the necessary requirements of attendance, age, education, and physical fitness, and the child was taught, if necessary, to write a letter asking for a transcript of his birth certificate. The New York child-labor committee's pamphlet of information as to how to secure foreign birth certificates was used. The child was not granted a school record until he had brought a note consenting to his leaving school signed by his parent and had complied with all the educational requirements. He was therefore not delayed later at the issuing office.

One principal, on the other hand, stated that it was not the school's business to help the child obtain an employment certificate. He

<sup>1</sup> The description of procedure in New York City schools here given is based largely upon a report made by Miss P. K. Angell to the Public Education Association of New York City.



said he simply obeyed the laws and the rules to the letter, so that if any trouble arose about any child who left his school he would be able to defend himself. Another principal said she felt that her responsibility ended with reading the law to a child who applied for a school record.

In Buffalo, since January, 1915, principals of public schools, in response to requests from the vocational-guidance committee of the public schools, have required children who ask for school records to bring the written consent of their parents on a regular form on which the parent states the reasons for the child's going to work. Unless the parent signs this statement the child is not given a school record. Several parochial schools are cooperating in this movement. In some schools the principal also requires the parent's signature on the school record in the specified place before allowing the child to go to the issuing office, a procedure which later saves delay for the child.

Rochester children do not receive their school records until after they have met all requirements for certificates except the physical examination.

In the smaller cities the superintendent of schools rarely gives the child any instructions as to the legal requirements for obtaining an employment certificate. Sometimes, however, teachers or principals may give such instructions.

In Albany, Troy, and Little Falls a child is not granted a school record until he can prove to the superintendent of schools that he has already secured a promise of employment.

In New York City and Buffalo the records of children enrolled are kept in the individual schools; no central control is maintained over promotions; and when children receive records no central office is directly notified. In Rochester, on the other hand, duplicate records of the age, progress, and attendance of every child enrolled in the public schools are sent at the end of every semester to the office of the efficiency bureau. When a pupil leaves school for any cause his permanent record card is also sent. This card shows the child's ratings and attendance, as does the similar bureau of attendance card in New York City. In Troy, Little Falls, and Tonawanda the superintendent of schools has duplicate records of the grade, ratings, and attendance of every child enrolled in the public schools. These records are consulted when the child applies for a school record, so that the superintendent can ascertain for himself whether the child has complied with the educational requirements. In the other cities visited the superintendent, in countersigning the school record, accepts the statement of the principal.

In first-class cities the statements on school records issued by parochial schools are accepted as are those on records issued by the

public schools; and even in the second and third class cities, where careful supervision is generally maintained over the qualifications of public-school children, superintendents of schools accept the statements signed by executive officers of parochial schools.

### LITERACY TEST.

As previously stated, the law provides that the officer issuing a certificate must examine the applicant and "after making such examination shall sign and file in his office a statement that the child can read and legibly write simple sentences in the English language."

In New York City a Third Reader is used for this test, and from this reader sentences are dictated for the child to write. No reading test is given. Up to January, 1915, however, different tests were in use in the various borough offices and in some no test was given. During 1915, 79 applicants in New York City were refused certificates because of inability to pass this test. In Buffalo a Fifth Reader is used. The child is instructed to open at any place and read, and is also asked to write any sentence he wishes. In Rochester, in case the child appears illiterate or can not speak English, a problem in fractions is given. Otherwise there is no test. In Albany a test in reading was formerly used, but at the time of this investigation had been discontinued. In no other city visited was any literacy test given, nor were the majority of issuing officers aware that the law required one.

### EVENING AND CONTINUATION SCHOOL ATTENDANCE.

In first and second class cities only, evening-school attendance is required by law of boys who have not completed a grammar-school course. In these cities any boy between 14 and 16 years of age who has an employment certificate, but does not hold a school certificate showing that he has completed the course of study required for graduation from a public elementary school, must attend evening school for not less than 6 hours a week for a period of not less than 16 weeks a year.<sup>1</sup>

As for continuation-school attendance, the law provides that "when the board of education in a city or district shall have established part-time and continuation schools or courses of instruction for the education of young persons between 14 and 16 years of age who are regularly employed in such city or district," the board may require the attendance of any child who has not completed a grammar-school course and does not hold a certificate of graduation, unless the child is receiving elsewhere instruction approved by the board of education as equivalent to that given in the continuation school. The

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<sup>1</sup> Education Law, sec. 622, subsec. 1. For the text of this section see p. 125.

required attendance must be from 4 to 8 hours a week for 36 weeks a year, and must be between 8 o'clock in the morning and 5 in the afternoon. Children attending part-time or continuation schools are exempt from evening-school attendance.<sup>1</sup>

To all children who attend evening, part-time, or continuation schools as required, certificates of attendance must be given by the school authorities at least once a month and at the close of the term.<sup>2</sup> The employers of children subject to compulsory school attendance are required to keep and to "display" in the place where the children are employed these evening, part-time, or continuation school certificates.<sup>3</sup> A penalty of \$20 to \$50 for the first offense and \$50 to \$200 for a subsequent offense is provided for failure on the part of the employer to have such certificates on file.<sup>4</sup>

Such is the law. In practice, evening-school attendance is enforced in some cities and not in others; in no place has part-time or continuation school attendance been made compulsory; and evening-school attendance certificates are issued in only a few places in the State and are rarely if ever demanded by inspectors or attendance officers.

In New York City evening-school attendance is believed to be a hardship for a child who works all day, and consequently no serious attempt is made by attendance officers to enforce the provision. At the time of this investigation instructions as to the requirement, however, were given to boys when they received their certificates at the issuing office. Recently a statement to the effect that attendance is required has been stamped on the certificates granted to boys who should attend evening school. In the evening schools, moreover, manual training shops have been maintained at great expense per pupil, and extra activities of various kinds have been tried in order to attract pupils of all ages. Nevertheless, during the school year 1914-15 only 4,093 "compulsory education pupils" were enrolled, and the average attendance of these was only 2,032.<sup>5</sup>

The course of study for evening schools in New York City is prepared by principals and educational experts and is approved by the board of superintendents. High-school, trade-school, and elementary-school courses are offered. Special provision for the boy who is required to attend is made in the elementary-school course, which comprises the work of the second half of the sixth to the second half of the eighth grade of the elementary day schools. Spe-

<sup>1</sup> Education Law, sec. 622, subsecs. 2 and 3. For the text of this section see p. 126.

<sup>2</sup> Education Law, sec. 631. For the text of this section see p. 128.

<sup>3</sup> Education Law, sec. 627. For the text of this section see p. 127.

<sup>4</sup> Education Law, sec. 628. For the text of this section see p. 127.

<sup>5</sup> New York City Department of Education: Seventeenth Annual Report of the City Superintendent of Schools; Report on Evening Schools for the Year Ended July 31, 1915, p. 92.

cial provision is also made for teaching English to foreigners. No fee is charged.

In Buffalo an effort is made to enforce evening-school attendance, not only of boys, but also of girls who hold employment certificates. One school in particular claimed to have no more difficulty with girls than with boys. But when parents refuse to send girls the cases are not followed up as are those of boys. At the first of each school year, individual evening schools try to interest children in their courses by sending out invitations to all those who were enrolled during the previous year. The courses offered are prescribed by the superintendent of schools and include English and business and vocational branches in addition to the academic course. An initial fee of 50 cents is required of all those enrolling, but if the student has attended regularly this fee is returned at the end of the school year. This requirement insures more regular attendance, and thus enables the school to do a higher grade of work than would otherwise be possible. The total enrollment of persons of all ages in the evening schools during the school year 1914-15 was 14,313. Of this number, 2,198 were working children.

In Rochester, as in New York City, the department of public instruction is not in sympathy with the requirement of evening-school attendance for employed children, and no attempt is made to enforce the law. Evening-school courses are offered, however, in English, stenography, citizenship, and along vocational lines. For enrollment in the elementary evening schools a fee of \$1 is charged, but this is returned at the close of the school year to those attending regularly. The number of pupils enrolled during the school year 1914-15 was 7,891, but of this number only 329 were children under 16 years of age.

In Albany, according to the superintendent of schools, evening-school attendance of all boys who hold employment certificates and have not finished the eighth grade is enforced. The superintendent states also that he attempts to make girls attend evening school, but that they are not followed up carefully. He makes an earnest effort to secure the cooperation of employers. A notice, for example, is mailed to them instructing them in the provisions of the compulsory education law and requesting the names of children employed.<sup>1</sup> Reports are also made to them of the progress and behavior of the boys they employ and of the failure of any such boys to attend regularly.<sup>2</sup> This system aids in keeping track of the children employed. The course of study is determined by the superintendent of schools, and the evening-school principal reports to him. The standard of instruction is similar to that of the day school, but is

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<sup>1</sup> Albany Form 1, p. 164.

<sup>2</sup> Albany Form 2, p. 164.

somewhat simplified. Business and technical courses are offered in the evening high school, and in the evening grammar schools the same courses are given as in the day schools, including special instruction in English to foreigners. Vocational courses were added during the school year 1914-15, but these are not open to children under 16 nor to children without the equivalent of eight years' elementary-school education. No fee is charged for attendance at evening grammar schools, but a fee of \$1 is required for the high-school or vocational courses. This fee is later returned to the child if attendance has been fairly satisfactory.

At Troy evening-school attendance is enforced in the same way as is day-school attendance, and the standard of instruction is set by the superintendent of schools. But in neither Syracuse nor Utica has any serious attempt been made to enforce evening-school attendance, which is felt to be a hardship to a child working during the day. The superintendents prescribe the course of study to be followed, but no well-defined course is offered for a child under 16 years of age.

A few attempts at continuation-school instruction have been made in the first-class cities, but attendance has been voluntary and none of the classes conforms to the requirements of the law pertaining to continuation schools. In New York City part-time classes for children between 14 and 16 years of age exist in a few establishments. Instruction is under the auspices of the board of education, and, while employed in these particular establishments, children are required by their employers to attend. In Buffalo a continuation school for printers' apprentices under 16 years of age was established in 1912-13. Attendance is voluntary and, though the cooperation of employers was obtained at first, the school has not been a continued success. In Rochester a continuation class has existed since September, 1914, for girls between 14 and 16 years of age who are employed in one department of a certain button-making establishment. These girls, who are required by the firm to attend forenoons every other week while employed, receive general instruction in academic subjects and, when first employed, specific instruction in the work required at the factory. In September, 1915, a continuation class in salesmanship was formed of girls employed in department and specialty stores. This class meets in the forenoon 4 days a week and the term is 12 weeks. Trade schools and vocational classes which cooperate with employers exist not only in all the first-class cities but in other cities throughout the State.

### ENFORCEMENT.

The laws providing that children under 14 years of age shall not be employed and that children between 14 and 16 years of age shall have employment certificates when at work and shall attend school

when not at work are enforced principally by two sets of officials—local school authorities, who are mainly interested in keeping children in school; and inspectors of the State industrial commission, who are solely interested in seeing that children do not work illegally. Between these two authorities are interposed the officials of local health departments, who open the gates of industry to children and upon whose cooperation the other two agencies are largely dependent in their work.

The functions of local school authorities in enforcing school attendance are usually divided into three parts, the work of school principals and teachers, that of attendance officers, and that of school-census enumerators. As the appointment of one or more attendance officers is mandatory for every city, school district, and township in the State,<sup>1</sup> school principals and teachers rarely have any duties beyond keeping accurate records and making reports of attendance. Teachers in all schools, however, private as well as public, are required by law to keep accurate daily records of the attendance of all children under 16 years of age, and these records may be inspected or copied at any time by attendance officers or by other persons "duly authorized by the school authorities of the city or district." Any teacher, moreover, who does not "fully answer all inquiries lawfully made by such authorities, inspectors, or other persons," is guilty of a misdemeanor and liable to a fine of not more than \$500 or to imprisonment for not more than one year, or both.<sup>2</sup>

The duties of attendance officers relate, not only to children already enrolled in school who may drop out before they have passed the compulsory school age, but to any child in the community, enrolled or not enrolled, who is under 16 and is illegally absent from school. In order that attendance officers may be enabled properly to enforce school attendance they are given legal authority to enter, during business hours, factories and mercantile or other establishments and to examine the employment certificates and registers of children employed in such establishments.<sup>3</sup> They may arrest truants without warrant and deliver them over either to the teacher or, in case of habitual and incorrigible truants, to a police magistrate for commitment to a truant school. A report of the disposition of each child must be made to the school authorities. Anyone who interferes with an attendance officer in the discharge of his duties, or any employer who refuses to show him the register or employment certificates of children in his employ, is guilty of a misdemeanor and liable to a fine of not more than \$500 or to imprisonment for not more than one year, or both.<sup>4</sup>

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<sup>1</sup> Education Law, sec. 632. For the text of this section see p. 128.

<sup>2</sup> Education Law, sec. 629; Penal Law, sec. 1937. For the text of these sections see pp. 127, 131.

<sup>3</sup> Education Law, sec. 633, subsec. 3. For the text of this section see p. 128.

<sup>4</sup> Education Law, sec. 634; Penal Law, sec. 1937. For the text of these sections see pp. 128, 131.

Attendance officers are mainly relied upon to locate children not enrolled in school, and inspectors of the State industrial commission are depended upon to see that children are not illegally employed. The law provides, indeed, that attendance officers *may* visit places of employment, but that agents of the industrial commission *must* do so.

Inspection for violation of the minimum-age and employment-certificate laws in factories throughout the State and in mercantile and other establishments in first and second class cities is, in fact, the duty of the industrial commission. "As often as practicable" factories must be visited by inspectors of the division of factory inspection,<sup>1</sup> and mercantile and other establishments in first and second class cities by inspectors of the division of mercantile inspection.<sup>2</sup>

In cities other than those of the first or second class but having 3,000 or more inhabitants the boards or departments of health or health commissioners are charged with the duty of enforcing the law relating to mercantile and other establishments. In these cities, however, the law does not provide that there "shall" be inspection but merely that there "may" be inspection.<sup>3</sup>

In all factories where women or children are employed and in mercantile establishments in first and second class cities where three or more women or children are employed a copy or abstract of the law relating to their employment must be posted on each floor.<sup>4</sup>

Inspectors and other officers charged with the duty of enforcement have authority to enter, at reasonable hours, any establishment mentioned in the law to look for children and to demand the production of employment certificates, together with a register of names, ages, birthplaces, and addresses of all children under 16.<sup>5</sup> All persons connected with these establishments must give the information demanded by an inspector; and no one may interfere with or obstruct an inspector in the performance of his duties.<sup>6</sup>

Penalties for violation of the child-labor law fall directly upon the employer, but for failure to send a child to school the parent is liable to a fine not exceeding \$5 or 5 days' imprisonment for a first offense and to a fine not exceeding \$50 or 30 days' imprisonment, or both, for a subsequent offense.<sup>7</sup> For failure on the part of the employer to have on file an employment certificate, or for any violation of the labor law for which no other penalty is imposed, a general penalty is provided

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<sup>1</sup> Labor Law, sec. 56. For the text of this section see p. 118.

<sup>2</sup> Labor Law, sec. 59. For the text of this section see p. 119.

<sup>3</sup> Labor Law, sec. 172. For the text of this section see p. 124.

<sup>4</sup> Labor Law, secs. 99a and 173. For the text of the latter section see p. 125.

<sup>5</sup> Labor Law, secs. 56, 59, 76, 167, and 172. For the text of these sections see pp. 118, 119, 122, 124.

<sup>6</sup> Labor Law, secs. 43, subsec. 2, and 172. For the text of these sections see pp. 117, 124.

<sup>7</sup> Education Law, sec. 625. For the text of this section see p. 126.

ranging from a fine of \$20 to \$50 for a first offense to one of \$250 and 60 days' imprisonment for a third offense.<sup>1</sup> For failure to have on file the employment or school-record certificate required by the education law the employer is liable to a fine of from \$20 to \$50 for a first offense and from \$50 to \$200 for each subsequent offense.<sup>2</sup> For the employment of children under the minimum age the penalties are the same as for the employment of children without certificates.

#### SCHOOL ATTENDANCE.

*New York City.*—Two principal methods of enforcing school attendance are used, the first consisting of reports of absences sent by the principals of schools to the bureau of attendance, and the second consisting of reports from all other sources. The first method obviously affects only children who are already enrolled in a city school. The second method affects all children of compulsory school age, whether or not they have ever been enrolled in any school in New York City.

All children between 7 and 16 years of age who are absent from public school, unless the absence is excused or known to be legal, are reported by the principal, on the third day of absence, to the district supervisor of the bureau of attendance. If the child is known to be a truant, the principal must report the absence on the first day it occurs, and if he thinks best he may report any absence on the first day. The report of the child's absence is made on a quadruplicate form, one copy of which is kept by the principal; the others are sent to the district supervisor of the bureau of attendance. The attendance officer investigates, and if he finds the absence illegal returns the child to school as soon as possible. Even when he finds the absence legal he may reinvestigate if the child does not later return to school. In either case he reports to the main office of the bureau of attendance, where one copy of his report is filed. Two copies of this report are sent back to the principal, who keeps one as a record of the disposition of the case and returns the other to the bureau as a receipt. After 20 days of absence the principal either is directed to discharge the child or is notified that the case is being handled as a violation of the compulsory education law. A child who is so seriously ill that he can not return to school within three months may be discharged, upon a physician's certificate, to a "general suspense register"; but full particulars must be sent to the main office of the bureau of attendance. In case a child who is absent can not be located, the principal may apply, after 10 days, for permission to discharge him—pending further investigation—to the "general suspense register."

When a pupil transfers from one public school to another, he is given his permanent record card and a notice of transfer. The prin-

<sup>1</sup> Penal Law, sec. 1275. For the text of this section see p. 131.

<sup>2</sup> Education Law, sec. 628. For the text of this section see p. 127.



principal retains one copy of the notice and mails another copy to the main office of the bureau of attendance. The pupil presents his notice to the principal of the school he is entering, and the principal in turn notifies the bureau of the child's admission. The bureau then notifies the principal of the first school, and the child is discharged. But if at the end of 7 days no report has been received from the second school, the bureau investigates; and if at the end of 10 days the first school has not been notified of the child's admission to the other school, the bureau may direct the principal to discharge the child; or, if it fails to do so, the principal may discharge him and notify the bureau. The bureau continues its investigation of any case not definitely settled, even though the school has discharged the child.

The forms used by the bureau for reporting absences and transfers are distributed among all schools, parochial and private as well as public, and, though all parochial and private schools do not avail themselves of the services of the bureau in every case of absence, cooperation is said to be maintained with many of them. Pupils admitted to a public school from schools not cooperating are reported to the bureau as though from another city.

The school census, which later is described in full, is the principal method of detecting children of compulsory school age who have never been enrolled in any school in New York City. Cases of truancy discovered by census enumerators or school attendance officers, and any such cases which may be reported from outside sources, are handled exactly as are those reported by schools.

Beginning in an experimental district, the cooperation of the police department has been secured in enforcing school attendance. When a patrolman finds a child illegally on the street during school hours he takes him to the nearest school, delivers him to the principal, and receives a signed receipt.<sup>1</sup> If the child is not a pupil of the school to which he is returned, the principal notifies the district supervisor to send an attendance officer to take charge of him. A child who is excused from attendance because of physical illness or mental defect is furnished with an identification card to show attendance officers and patrolmen that he need not be returned to school. The child with an employment certificate, however, is not given an identification card, as he must be either at work or at school and therefore is not legitimately absent from school when not employed.

If a child in this experimental district is reported absent three times, even if found to be legally absent each time, he may be summoned with his parents for a hearing before the division supervisor; but this summons is not always issued, as in certain cases it may

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<sup>1</sup> New York City Form 23, p. 150.

appear that more patience should be used. These hearings are intended in general to aid in maintaining personal interest between the parents and children and the school authorities; to serve as a basis for administering relief in the way of clothing, if necessary; to ascertain whether or not the child should be committed to an institution or whether special treatment is needed; and to prevent, if possible, a court record against the child. During the hearing the details of the case are thoroughly canvassed and the parent is asked if he is willing to have the child, in case of further absence, committed to an institution. If so, the parent signs a statement consenting to commitment, and the child is paroled to the attendance officer, is transferred to another school, and, in case the offense is repeated, is sent to an institution. If the parent is not willing, the child is paroled as in the previous case, but if he is absent again the case is taken before the court of domestic relations as one of parental neglect. There the child may be once more paroled. But if the case is not disposed of at this court, or if necessary later, the child may be taken to the children's court, by which he may be committed to an institution.

*Buffalo.*—In Buffalo the enforcement of school attendance is divided between the permanent census board and the department of compulsory education. The individual principal devises his own means of reporting absentees and reports from time to time to the attendance officer assigned to his district. In some instances, by sending out postal-card notices, he attempts to interest parents in the regular attendance of their children. In the congested districts of the city the attendance officers call at the schools daily. As in New York City, all transfers between public schools are supposed to be reported to the permanent census board. And if within a reasonable time a return notice does not come from the school which the child is to enter, an employee of that board telephones to ascertain whether or not he is there. If not, the case is referred to the compulsory education department. All schools do not report transfers, and sometimes it is not known that a transfer has occurred until a notice comes in from the second school. No record of attendance or progress of children exists in any central office either while they are in school or after they leave.

*Rochester.*—In Rochester the permanent census board and the efficiency bureau jointly enforce school attendance. Cases of unexcused absence or of absence suspected by the principal of a public school to be illegal are reported daily by telephone to the permanent census board. This office reports these cases by telephone to the proper attendance officers, who investigate them. In addition, principals often notify attendance officers directly of absences.

When a child transfers from one public school to another, or from a public to a parochial school, the school he is leaving mails a transfer card to the school he is to enter, and the latter, if a public school, notifies the efficiency bureau whether or not the child appears. If he does not appear, or if the parochial school does not report, the bureau directs an attendance officer to follow him up. A further aid in keeping track of children in the public schools is the weekly roll call in each school for changes of address.

When for any reason a child leaves school, his permanent record card is sent to the efficiency bureau. If the cause is unknown, principals are instructed to report the case to the attendance officer and not to return the permanent record card marked "Cause unknown" until the officer's report has been made. The bureau can easily check up such cases to see whether the attendance officer has been notified. Thus the names of children who have left school on a school record, who have moved out of the city or to a new address, who have become 16 years of age and left school, or who have left for any other reason, are all reported to the office of the efficiency bureau. At the end of every semester the attendance and progress of every child enrolled in the system who has left is checked up with the permanent record card, and cases which have not been reported by schools during the year are then discovered.

The reports of work of the attendance officers, who follow up also the attendance of parochial school children, are filed in the office of the efficiency bureau.

*Second-class cities:*—Of the second-class cities, Albany and Troy have systems of daily reports by telephone of unexcused or illegal absences, which are followed up by attendance officers. In Utica absences are reported to the attendance officer during his regular rounds, but special calls are telephoned to him at the office of the superintendent of schools. In Syracuse, according to the attendance rules, "the principals of the several schools shall, within 24 hours, notify the attendance officers, in writing, regarding all unexcused absentees." Such reports may also be telephoned to the attendance officers each morning or at noon, when they are at the superintendent's office. But the rules allow a child to be out of school one day, and if he returns the morning after being absent he need not be reported. One principal said that she did not wait—as the rules prescribe—until the second morning to send this written report, but twice a day sent to the attendance officer a note containing the names of absentees from each session. Parochial schools sometimes cooperate in reporting absences, but generally do not.

A system of checking up transfers between public schools, but not between parochial schools or between public and parochial schools, exists in all the second-class cities visited.

*Third-class cities.*—Daily reports by telephone and investigations of absences are made in Little Falls and Tonawanda, and when children transfer between public schools the superintendent's office is notified. At Cohoes the officer visits every school once a week, follows up all unexplained absences at that time, and also locates transferred children.

*Villages.*—In Victory Mills, the only village visited, the attendance officer follows up a child the first day he is absent.

### SCHOOL CENSUS.

The duty of taking the school census, as has been seen, devolves in New York City on the bureau of attendance, in Rochester and Buffalo upon permanent census boards, and in the other cities, towns, and villages upon the local authorities in charge of the schools. Any parent or other person having charge of a child is liable to a fine of not more than \$20 or to imprisonment not exceeding 30 days for withholding or refusing to give information or for giving false information.<sup>1</sup> In Buffalo and Rochester the plan of census enumeration provided by law is based upon a census taken by the police commissioners under the regulations of the census board and constantly amended by information to be reported by parents directly to the police stations. In these cities it is the duty of persons in parental relation to children between 4 and 18 years of age to report certain facts in regard to such children "at the police station house of the precinct within which they severally reside." Thus removals from one police precinct to another or from one school to another, new arrivals in the city, the fact that a child is shortly to become of compulsory school age, and the fact that a child has gone to work, must all be reported to the police and by them to the school authorities.<sup>2</sup>

The results of a school census have no relation in New York, as in some States, to the distribution of State school moneys, which is based on the number of duly licensed teachers.

*Outside of first-class cities.*—While a permanent census board may be established in any city in New York State, no city not of the first class has such a board. The law provides that if a board does not exist, then, in October of every fourth year beginning in 1909 the school authorities of every city of the second and third classes shall take a census of all children between 4 and 18 years of age, including information in regard to the employment and school attendance of children similar to that gathered in the cities maintaining a permanent census board.<sup>3</sup> Although this census is used to check the

<sup>1</sup> Education Law, sec. 653. For the text of this section see p. 130.

<sup>2</sup> Education Law, sec. 650. For the text of this section see p. 129.

<sup>3</sup> Education Law, sec. 661. For the text of this section see p. 130.

school registration, it is taken so seldom that it is but little aid in the regular enforcement of attendance laws. In villages and school districts outside of cities the board of trustees is required to take annually, on the 30th of August, a census, including the same points, of children between 5 and 18 years of age.<sup>1</sup> A copy of this census is filed with the teachers in these districts, so that it may be checked with the registration.

*Permanent census, New York City.*—In New York City the census is taken by the attendance officers, who enumerate all children under 18, including even those under 4 years of age.

The census is taken by blocks; a family card is used for facts as to each child's physical condition, literacy, school attended and grade attained.<sup>2</sup> No index or individual identification card is kept. If the child is employed, the employment certificate number is taken and a note is made of the last school attended. Information regarding positions is taken on an individual schedule<sup>3</sup> but, as it is frequently obtained from the parent, may not always be accurate. If a parent does not know where a child is working, a postal is left to be filled in and mailed to the board or given to the enumerator at another time.

In the course of enumeration children are frequently found who need special attention but might not otherwise be located. Their names are all recorded on the daily reports of the officers<sup>4</sup> and are later reported to the departments or agencies responsible for their care. Children found illegally absent from school are reported to the district supervisor of the bureau of attendance and are dealt with like other truants. Among such children are those staying at home either with or without employment certificates, boys working during the day and not attending evening school, and foreign-born children who have never been enrolled in any school.

Policemen have been cooperating in the census, experimentally at least, by reporting to the bureau of attendance changes of address of families in their precincts.<sup>5</sup>

*Permanent census, Buffalo.*—In Buffalo no enumerators are employed regularly in the field taking the census, but whenever it is taken 60 policemen are transferred from their regular beats and work, until the city has been canvassed, under the direction of the secretary of the permanent census board. Three regular canvasses were made from 1909 to 1914. The census is taken by blocks, as in New York City, and a special census card<sup>6</sup> is used. This card calls for information as to birthplace, date of birth, school attended, employment and literacy of the child, and nativity of the parents.

<sup>1</sup> Education Law, sec. 652. For the text of this section see p. 130.

<sup>2</sup> New York City Form 24, p. 151.

<sup>3</sup> New York City Form 25, p. 152.

<sup>4</sup> New York City Form 26, p. 153.

<sup>5</sup> New York City Form 27, p. 154.

<sup>6</sup> Buffalo Form 5, p. 160.

All this information for each child is transcribed to a regular record card.<sup>1</sup> The cards are filed by school districts or under the names of private schools, the records of children 4 to 6 years of age being kept separate from those of children 7 to 18 years of age. Moreover, to aid in locating the child's record card, an identification card, which indicates the school district or private school, is also made out for each child.

A complete list of children registered is sent in once a year from all schools, and new names are sent in as they are registered. Parochial schools, it is claimed, report more promptly and fully than public schools, and the dates on registration lists and transfers on file in the office bear out this statement.

No constant canvass is maintained during the year, but the 632 policemen of the city are expected to report the names and addresses of all families moving into their respective districts. In addition, the moving-van companies are asked to report the names and addresses of families moved by them, and are furnished with blank forms<sup>2</sup> for this purpose. Cooperation along this line has been fairly successful.

During the regular canvass a child found staying at home or working illegally is reported on a truancy card<sup>3</sup> to the chief of compulsory education, and a duplicate record of each case is kept in the office of the permanent census board. When such a child is located the card is returned with a notation showing the disposition of the case. No limit is placed on the time for reporting each child, as it often takes weeks or months to force him back into school. The chief of compulsory education believes that the important thing is to locate and deal with the child rather than to make a report to the census board which will make its records complete.

The secretary of the permanent census board sends a monthly report of its work to the board and to the chief of the State attendance division at Albany. This report covers such points as number of changes of address, new registrations, new arrivals in the city, and sources of information.

The office files of the census board are used to some extent by inspectors of the department of labor or officers of other agencies for locating and proving the ages of children.

*Permanent census, Rochester.*—In Rochester six policemen are engaged continually in taking the census of children 4 to 18 years of age. The census is taken by streets; and the individual card<sup>4</sup> requires information as to birthplace of parents and child, date of birth, proof of age, employment, physical condition, school, and grade, and on the back of it is kept a record of the employment

<sup>1</sup> Buffalo Form 6, p. 160.

<sup>2</sup> Buffalo Form 7, p. 160.

<sup>3</sup> Buffalo Form 8, p. 161.

<sup>4</sup> Rochester Form 2, p. 102.

if the child is at work. For every child whose name appears on an original card an index or identification card, which is an exact copy of the original card, is made out. The addresses of children on these cards are kept constantly up to date.

When a child is found staying at home illegally or working without a certificate the memorandum of such fact is transferred from the original record card to another form,<sup>1</sup> one copy of which is kept in the office of the board, while the other two are sent to the attendance officer, factory inspector, mercantile inspector, or whoever should take charge of the case. When the officer has disposed of the case he reports back to the office of the board on one of the slips. This slip is filed and a duplicate record of each case is also kept by the secretary of the permanent census board.

Often a parent can not tell where a child is working or what his occupation is. In such a case a sheet of instructions and a postal card are left at the house by the police officer or mailed to the parent from the office. The postal card is to be filled in by the parent or child and mailed to the office, where the information is copied on the original record card.

Each year the census board copies, from the records of the efficiency bureau, complete lists of children registered in the schools, and, from time to time during the year, adds the new names which have been registered. The enrollment lists sent in from the public schools are complete and accurate, but often the parochial-school lists are not.

Twice a week the census board has the transfers occurring in the public-school system copied from the records of the efficiency bureau and the information secured added to the original record cards. The address given on the transfer card is noted on the original record card, but the old address is not changed permanently until a policeman has found that the family is actually living at the new place.

Reports concerning new families sometimes come to the office from other sources than police officers. The name and address of any such family are listed on a special form and given to the proper police officer when he canvasses the street on which the family is reported to live. When a family concerning whom there is no record in the office of the board is reported to have children, the police make a special call to inquire. If such a family is reported to be moving, the police go both to the new and to the old address.

A daily report in duplicate is required of each police officer, one copy of which goes to the captain of the precinct and the other to the chief of police. A report on each street is also made as soon as the canvass of the street is finished. The information on these last reports is transferred to a regular form for a monthly report for the entire city.

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<sup>1</sup> Rochester Form 3, p. 163.

These monthly reports, and also the reports concerning transfers and new registrations copied from the records of the efficiency bureau, are used in the monthly report which the secretary sends to the permanent census board and to the chief of the State attendance division at Albany.

The board constantly receives from agencies and persons interested in children requests for information regarding specific children. A record is kept of all such information given.

### IMMIGRANT CHILDREN.

The industrial commission is required by law to procure, with the consent of the Federal authorities, complete lists of the names, ages, and destinations within the State of New York of all "alien" children of school age and to furnish copies of these lists to the school authorities in the localities to which the children are destined, in order to aid them in enforcing the compulsory school-attendance law.<sup>1</sup>

In actual practice the United States Immigration Office at Ellis Island at irregular intervals sends to the school authorities throughout the State the names, ages, nationalities, and intended addresses of children of school age arriving from foreign countries. In New York City, even though these reports come frequently to the bureau of attendance, the enumerators often find it impossible to locate the families because the addresses given do not exist, or are incorrect, or merely temporary, as families may stay only a few days in the city on their way to another part of the country.

A child who comes to this country without his parents is admitted only if some responsible person signs a bond to take care of him until he is 16 years of age. These "bonded" children are more easily located than ordinary immigrant children, as they are not allowed to work but are obliged to attend day school until they are 16 and reports of their attendance must be sent every three months to the New York office of the United States Immigration Service. The bond states that the signer shall make this report, but in New York City the permanent census board ascertains these facts and reports regularly to the United States immigration authorities.

Bonded children obviously can not so easily escape the census board's enumeration as can those who arrive with parents or relatives, and who, if they claim to be 16, can easily enter industry and may never be found by the enumerator. The only hope of placing such a child in school would be that the industrial inspector might by chance discover him in the course of an inspection and challenge his age.

In Buffalo lists of immigrant children are sent to the compulsory-education department and in Rochester to the permanent census

<sup>1</sup> Labor Law, sec. 153, subsec. 2. For the text of this section see p. 124.



board; but to these cities the lists are sent only occasionally when a considerable number of children have been recorded as bound for a single city, and owing to this delay the attendance officers frequently find it impossible to locate them. In the smaller cities such reports are sent from time to time to the superintendent of schools.

#### APPLICANTS FOR CERTIFICATES.

*New York City.*—Daily reports of all children who receive or are refused certificates are sent by the bureau of child hygiene to the bureau of attendance. The reports of those who are granted certificates are made out in triplicate and include the name, address, and date of birth of each child, the school attended, the grade, the date of issuance, and the certificate number.<sup>1</sup> One copy is sent to the bureau of attendance and the other two are filed. At the end of each month a set of these daily reports is mailed to the industrial commission, to be used for statistical purposes. When the bureau of attendance receives notice that a child has been granted an employment certificate it notifies<sup>2</sup> the school which he has attended to that effect, and the school, unless the child is to work only after school hours, may then take his name from the register. The principal, however, is required to report back to the bureau that its notice has been received and to give, if possible, the name and address of the employer. Fifteen days after a child has been reported as having obtained a certificate, unless meanwhile a notice has been received that he has reentered school, an attendance officer visits his home or the place where he is supposed to be employed to see whether or not he is at work. If not at work, the child is returned to school immediately, unless in the judgment of the officer he ought to be given more time to search for work. In the latter case the officer later re-visits the home, and if upon repeated visits he finds that the child has not secured employment and refuses to attend school, the child and parent are summoned to a hearing where the details of the case are inquired into. After this hearing the child may be given additional time to search for work, or the officer may be instructed to return him to school immediately.<sup>3</sup>

Reports to the bureau of attendance of children who are refused certificates are made out in quadruplicate for each child, and include the name and address, the name of the parent, the date of birth of

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<sup>1</sup> New York City Form 28, p. 164.

<sup>2</sup> New York City Form 29, p. 165.

<sup>3</sup> A boy and his mother were summoned to a hearing because the boy could not obtain work and was not at school. The testimony showed that his attempts to get work had been fruitless. The boy was referred to a woman who promised to make every effort to secure him employment; the attendance officer was instructed to follow up the case and report again, and the boy and his parent were told that in a short time, unless he found employment, the boy must return to school.

the child, and the cause of refusal.<sup>1</sup> One of these is filed at the central office of the bureau of attendance; the others are sent to the proper district office. The district supervisor sends one of these three to the school which the child attends, files one, and gives the other to an attendance officer. After the attendance officer has investigated the case, his copy of the report is returned to the central office to be placed in a tabulation file. Children refused because of physical defects are followed up<sup>2</sup> both by the school nurse and by the attendance officer.

Within the division of employment certificates in New York City, under the supervision of the chief, a system of reports is maintained which tends to make the procedure uniform and the work of the offices comparable. Each borough keeps a daily record of cases handled, and at the end of each week summarizes these records in a weekly report<sup>3</sup> to the chief of the division. These reports show the number of applications made and of certificates granted, refused, and pending, and a detailed classification of the reasons for refusal. From them the chief compiles on the same form a weekly report for the city, which he sends to the director of the bureau of child hygiene. A similar report of certificates granted, expired, and in force is sent at the end of each quarter from the borough offices through the chief of the division to the director of the bureau of child hygiene.

*Buffalo.*—When a principal grants a school record he is supposed to send a notification by postal card<sup>4</sup> to the permanent census board. This notice, which gives the age of the child and the parent's name, is destroyed when the report is received from the department of health that the child has obtained a certificate. A clerk of the permanent census board goes to the issuing office daily for the names and addresses of all children granted or refused certificates. These cases are reported on regular blanks<sup>5</sup> provided for that purpose. For children refused certificates, as for children found illegally absent from school, truancy cards are filled in and sent to the chief of compulsory education, and attendance officers follow up the cases. For those receiving certificates no reports are made to the chief of compulsory education, nor is the individual principal sent any notice whatever of children who have received or been refused certificates. At the office of the permanent census board the regular record cards of children who have received certificates are filed separately in a "labor-certificate" file and are easily located. If a postal-card notice of the issuance of a school record has come in and the child does not apply for a certificate

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<sup>1</sup> New York City Form 30, p. 155.

<sup>2</sup> New York City Form 31, p. 155.

<sup>3</sup> New York City Form 32, p. 156.

<sup>4</sup> Buffalo Form 9, p. 161.

<sup>5</sup> Buffalo Form 10, p. 161. The forms used for listing granted or refused certificates differ so slightly that only the former is shown.

within a reasonable time, the school is notified by telephone and the principal may ask the attendance officer to investigate the case.

*Rochester.*—Whenever a child is granted a school record a postal-card notification<sup>1</sup> is sent by the principal of the school to the efficiency bureau, and if the child intends to leave school to go to work his permanent record card is also sent. The bureau of health telephones to the efficiency bureau at irregular intervals—daily during the busy season and once or twice a week at other times—the names of all public-school children who have received employment certificates and the school each child attended. These names are checked up in the office of the efficiency bureau with the records sent from the schools, and after an interval of ten days or two weeks the names of children whose permanent record cards have been received and concerning whom no report has come from the health bureau are reported to attendance officers. The child who receives an employment certificate for work after school and on Saturdays is treated like any other child so far as attendance is concerned. The checking of the registers with the permanent record cards in the enforcement of school attendance already discussed is a further aid toward preventing public-school children from dropping out of school and working illegally. But the system does not provide for finding the parochial-school child who stays out of school after receiving a school record and does not apply for a certificate.

The name and address of every child who has been refused or has received a certificate are procured each week from the issuing office by an employee of the permanent census board. A child who has been refused a certificate is followed up by an attendance officer, and cards containing the names of all the children who have received certificates are filed separately in the office of the permanent census board and are used by the attendance officers from time to time to ascertain what children have certificates. Thus all children from public and parochial schools alike and all newcomers to the city who are refused or granted certificates are checked up.

At the beginning of each school year the attendance officers are given the names of all children who requested school records but did not call for them during vacation and have not reported at school. They are followed up to see that they return to school or secure employment certificates, and the disposition of these cases is reported to the efficiency bureau.

*Second-class cities.*—No reports are made by the bureaus of health to the school authorities in the second-class cities studied. Hence there is no way of knowing from that source which children have certificates and which have not. In all these cities, except Syracuse,

<sup>1</sup> Rochester Form 4, p. 163. This card is also used to report changes of address within a district.

superintendents keep lists of all children to whom they have granted school records. In Syracuse the individual principals issue the school records, and therefore the losses to the school system as a whole can not be checked up until each principal's report is sent in at the end of the year.

*Third-class cities.*—In the third-class cities included in this study no regular system of reporting is maintained between health officers and superintendents of schools, but it is said to be comparatively easy to discover children who are illegally employed. In Little Falls and Tonawanda separate files of children who have received school records are kept in the office of the superintendent of schools, so that such children can easily be located. And in Little Falls, when the health officer has temporarily or permanently refused a child a certificate, he informs the superintendent so that the child may be expected at school.

#### UNEMPLOYED CHILDREN.

Local attendance authorities are responsible for the attendance at school of a child who is not at work. Since he must be at school when not lawfully and regularly employed, it is evident that a child who has received an employment certificate but has not succeeded in getting a job or has lost his job must return to school. But no machinery is provided in any New York law for enforcing such a requirement, and since the certificate is issued to the individual child, is returned to him when he loses employment, and is regarded as his property, it is difficult to provide for his return to school when unemployed. Furthermore, the law does not require that the child must be promised employment before he receives a certificate. As a result, an unemployed child—except in small communities where it can readily be known that he is out of work—is generally on the streets or staying at home. Even if he is found by an attendance officer, the production of an employment certificate and the statement that he is searching for work will usually exempt him from school attendance.

When a child in New York City receives his certificate the bureau of attendance makes a serious attempt to see that he either goes to work or returns to school. But after the child has gone to work the bureau has no means of knowing whether he keeps his job or whether, having lost it, he remains idle or goes back to school.

In the fall of 1914 the bureau of attendance, in cooperation with the largest elementary school in New York City, started a continuation class for unemployed boys over 14 years of age. The class was advertised in the surrounding districts, and boys were invited to come. Attendance was voluntary, and during the first term 81 boys, ranging in age from 15 to 18 years, attended. Only a few of these boys, and only 3 out of about 80 enrolled during the second term,

were under 16 years of age. Instruction is given in academic and commercial subjects and shopwork. The boys are also advised as to suitable vocations, and some efforts are made at placement.

In Buffalo an attempt is made, through the vocational-guidance committee of the public schools, to follow up from time to time children who have applied for positions, to learn what they are doing; and at times children out of work are persuaded to return to school. In Albany it is the plan of the superintendent to ascertain, at the time of granting the school record, where the child is going to work. If the evening-school principal in his daily reports shows the absence of a boy who has received a school record, the attendance officer goes to the place where the child has said he was employed. If the boy is working without a certificate, he is returned to day school. If working legally, he is ordered to attend evening school; and if his absence continues, he is followed up in the same way as though attending day school. In Troy a similar plan is followed during the time evening schools are in session. Girls, after they have once received certificates, are not followed up in either Albany or Troy. Ordinarily, moreover, there seems to be no way in either of these cities of preventing boys from attending evening school and loafing during the day.

In none of the other cities visited is provision made for the unemployed child. In Utica and Syracuse a child who has received an employment certificate is no longer obliged to go to school, whether or not he goes to work, and no serious attempt is made to follow up children with certificates or to enforce evening-school attendance. One superintendent frankly stated that he regarded an employment certificate as a permit to leave school and the school's responsibility as ending with the issuance of the school record.

#### INDUSTRIAL INSPECTION.

The procedure adopted by inspectors of the industrial commission is similar for factories and for mercantile establishments. In a small establishment or one of ordinary size the inspector, before going through the workroom, secures the certificates at the office, compares them with the names on the register, and on his rounds tries to locate each child. In an exceptionally large establishment, where many children are employed, an inspector does not identify each child with a certificate, but merely tests a sufficient number to assure himself that it is not customary for children to work without certificates in that establishment. The certificates on file are stamped with the inspector's name and with the date. Some representative of the firm usually accompanies the inspector on his tour of an establishment.

Whenever during his rounds the inspector sees a child whom he suspects of being under 16, he has the child sign his name on the first line of one of the forms<sup>1</sup> which he carries in a book for that purpose, and then looks over the certificates to see whether he has one for that child. If he finds the certificate, he compares the child's signature on it with that in the inspection book and enters the other facts required, particularly questioning the child as to the time of beginning and of ending work. If he does not find the certificate, he asks the child his age and the date of his birth. When the answers to these questions indicate that the child is under 16, or when the inspector doubts their truth, he has the child proceed to work in his presence and secures—both from the child and from the employer—the name of the person immediately responsible for the child's employment. If the child is admittedly under 16, the inspector orders him to procure a certificate or, if he is under 14, to return to school, and orders the employer to discontinue his employment until he has brought a certificate.

If, however, the inspector is in doubt concerning the child's age, he may require the employer either to furnish within 10 days satisfactory evidence that the child is over 16 or to discharge him. A notice<sup>2</sup> requiring an employer to furnish evidence of age may be served personally or by mail. In practice some inspectors serve it directly upon the employer as soon as a suspected case is discovered. Others simply tell the employer that a certain child appears to be under 16 and that his age must be proved, and proceed to secure whatever evidence of age is available. In the former case the child must be discharged in 10 days if his age is not proved; and in the latter more time may be allowed to send for documentary evidence of age. The evidence of age required may be, according to law, the same as that required for the issuance of an employment certificate. The papers constituting this evidence are filed with the industrial commission, and any person guilty of making a materially false statement in such papers is liable to a fine of not more than \$500 or to imprisonment for not more than one year, or to both.<sup>3</sup> Physicians' certificates of age are accepted, and examinations for such certificates may be given by two physicians of the department of health. According to law, if an employer fails to produce within 10 days satisfactory evidence of age and yet continues to employ the child, proof that the notice was given and that the evidence was not produced is prima facie evidence in any prosecution that the child is under 16 and is unlawfully employed.<sup>4</sup> But if no formal notice has been given, the

<sup>1</sup> Form 3, p. 135.

<sup>2</sup> Form 4, p. 136.

<sup>3</sup> Labor Law, secs. 76 and 167; Penal Law, sec. 1937. For the text of these sections see pp. 122, 124, 131.

<sup>4</sup> Labor Law, secs. 76 and 167. For the text of these sections see pp. 122, 124.

child is allowed to work until his age is proved; and the employer incurs no additional risk of prosecution unless he continues to employ illegally a child who has been shown to be under 16 years of age.

When a child tells an inspector that he is working illegally or when a violation is discovered in any other way, unless the employer is a repeated offender, the case is generally not referred to counsel until after a subsequent visit. If, however, the violation concerns a child under 14 years of age, no leniency is shown and the case is sent at once to counsel. In bringing cases for prosecution the child's statement of his illegal employment is not used as a basis of evidence, but the individual inspector must see the child actually employed illegally.

The accompanying table shows data for several years concerning the inspection of mercantile establishments, in so far as children are concerned:

*Inspections in mercantile establishments covered by section 161 of the Labor Law.<sup>a</sup>*

Year.	Number of inspections.	Number of children employed.				
		Total.	Legally.	Illegally.		
				Total.	Without certificates.	Under age.
1909.....	7,235	6,070	2,949	3,121	2,365	756
1910.....	5,236	4,832	2,461	2,371	1,660	711
1911.....	5,282	3,828	2,253	1,575	1,154	421
1912.....	8,395	4,925	2,823	2,102	1,346	756
1913.....	12,860	6,794	4,034	2,760	1,820	940
1914.....	24,808	7,494	4,887	2,607	1,761	846

<sup>a</sup> Figures taken from the Annual Report of Commissioner of Labor, New York State, 1914, p. 86.

Although inspections for child labor alone are sometimes made, yet in a general inspection the detection of illegal child labor is but a small part of the inspector's duties. Inspection must also be made for hours of labor of women, safeguards on machinery, sanitation, and protection from fire.

Inspectors record, on a factory-inspection card<sup>1</sup> or a mercantile-inspection card, information concerning an establishment received during their tours of inspection. Violations of the child-labor law are recorded on a child-labor form,<sup>2</sup> and cases of employment during illegal hours are given on the reverse of the same form. Each day reports of the work of the previous day are sent to the main office. Factory inspectors in New York City report to the office in the city; those in other parts of the State to the Albany office; and all

<sup>1</sup> Form 5, p. 137. The factory inspection form and the mercantile inspection form differ so slightly that only the former is shown.

<sup>2</sup> Form 6, p. 138.

mercantile inspectors to the main office, in New York City. When cases of violation of the child-labor law in factories are to be referred to counsel, the child-labor violation cards are kept in the offices of the supervising inspectors in different parts of the State until the counsel's action on them is completed. They are then sent to the Albany office. All violation records of mercantile establishments are examined by the chief mercantile inspector, who decides whether the facts proved justify sending cases to counsel.

The accompanying table shows, for the year ended September 30, 1914, the number and results of prosecutions for violations of the labor law concerning children in factories and in mercantile establishments.

*Number and results of prosecutions for violations of the Labor Law, year ended Sept. 30, 1914.<sup>1</sup>*

Place of employment, age of child, and cause of prosecution.	Number of cases.					Amount of fine.
	Total.	Pending.	Dis- missed, acquitted, or with- drawn.	Convicted.		
				Sentence sus- pended.	Fined.	
<b>In factories:</b>						
Under 14 years.....	37	1	19	14	3	\$60
From 14 to 16 years—						
a. Certificates.....	108	6	22	61	19	385
b. Hours.....	191	3	12	91	85	1,945
c. Prohibited occupations.....	7	1	1	4	1	20
<b>In mercantile establishments, etc.:</b>						
Under 14 years.....	216	10	10	161	35	770
From 14 to 16 years—						
a. Certificates.....	208	8	24	148	28	650
b. Hours.....	154	1	16	107	30	696

<sup>1</sup> Figures compiled from the Annual Report of Commissioner of Labor, New York State, 1914, pp. 70, 71, 74, 75, 96, and 97.

In the third-class cities visited no health officer, when this investigation was made, had ever inspected a mercantile establishment for woman and child labor. One officer stated frankly that it was impossible for him to find time for this work. Another stated that he had repeatedly called the attention of his board to this provision, but that it had not authorized him to inspect establishments. A third, who had been a health officer for 25 years, was not aware that such inspection was one of his duties.

### CONCLUSION.

The exact application of the New York minimum-age and employment-certificate laws is so complex and technical a subject that its discussion has been placed in the appendix. But the evident intent of the law is that children shall not be employed until they are 14 years of age, except boys over 12 in the gathering of produce; and that employed children from 14 to 16 shall hold employment certificates, or in certain



occupations in the smaller cities school-record certificates. And in practice agriculture and domestic service are the only occupations in which any large number of children are employed under 14 years of age or under 16 without certificates.

That the law, however, accomplishes its intent by means of a complicated and in part overlapping series of provisions, applying to different places of employment and to cities and villages of different sizes, presents a problem which can be solved only by the bill drafter, not by the administrator. All labor laws should be so clear and simple that at least their main points can be readily understood, not only by lawyers but certainly by all persons who are charged with their administration, and, if possible, by all persons who must conform to their provisions. As is shown in the appendix<sup>1</sup> the New York child-labor laws fail to meet this fundamental requirement of good labor legislation.

*General administration.*—The division of authority over the administration of the employment-certificate laws of New York State is unusual in three respects: First, New York is the only State in which health officers issue employment certificates; second, it is the only State in which health officers are given authority in certain cities and villages to inspect establishments for violations of the child-labor laws; third, it is the only State in which a State department of labor is given supervision both over the work of local health officers in issuing employment certificates and, so far as blank forms determine procedure, over the work of local school authorities in issuing school records to children. The unique feature of the New York system, indeed, is the prominent part played by local health officers.

The reasons for placing the burden of decision as to a child's fitness for work upon health officers rather than upon school authorities are stated to be, first, the need of having the issuing officers immediately accessible to the birth records; second, the fact that in the health department machinery and equipment for giving physical examinations already exist; third, the desire to avoid the feeling which might arise if any one set of school officials should issue certificates; and, fourth, the belief that the health officers act as a check upon school authorities who may wish to get rid of backward or disorderly children.

The present method is believed to insure a thorough physical examination and to evade the pressure brought to bear by parents upon teachers, principals, and superintendents to permit their children to go to work. It is believed that health officers, because generally not brought in such direct contact as school authorities with the children and their families, are better able to withstand the urgent entreaties of needy parents and to decide ultimately

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<sup>1</sup> See p. 111.

whether or not a child shall be given an employment certificate. It is also believed that—at least in New York City, where the schools are overcrowded and the classes so large as to strain the teachers' powers to the utmost—school authorities may yield to the ever-present temptation to allow stupid or troublesome children to leave school for work even though they have not fulfilled the educational requirements of the law. And the fact that, in 1915, 79 children who brought school records showing completion of the sixth grade were refused certificates because unable to read from a Third Reader seems to prove this belief true.

The result of placing the responsibility of issuing certificates upon local boards of health is undoubtedly to emphasize the physical examination. So far, however, as the educational requirements are concerned, it is difficult to see that this division of responsibility creates any materially greater degree of protection for the child in certificate offices of New York State than in those of other States where the school authorities who issue certificates are permitted to give applicants an educational test. The health officer in New York State himself must certify to the child's age and physical condition. He must certify also that the child "can read and legibly write simple sentences in the English language." Because of this provision of law children are given an educational test in New York City and in Buffalo, but in no other of the certificate offices visited. Moreover, a child in the third grade might be able to "read and legibly write simple sentences in the English language," and the only evidence ever required that the child has completed the sixth grade is the school record, which is issued by the school authorities and which, if "properly filled out and signed," must be accepted without question by the agent of the board of health who issues certificates. In other words, though the health officers can refuse certificates to children who are totally unable to read and write simple sentences in English, they have no power to prevent children from going to work without having fulfilled the real educational standard set by the law—completion of the sixth grade. Moreover, even health officers may not be immune from political and personal pressure to permit children to go to work.

Conditions, possibly temporary in their nature, appear to have made necessary in New York this division of responsibility for the child's entrance into industry. There are, however, three objections to the system. The first and most important is that divided responsibility is likely to mean a weak sense of responsibility in both agencies. The second is that the complete removal of the child at this critical stage in his life from the jurisdiction of school authorities who have thus far been the greatest influence in his life outside the home is

very likely to widen the tremendous gap that separates his school from his working life. And the third is that, by taking from the school all responsibility over the child and thus causing it to lose interest in him as soon as he leaves its doors, this removal tends to make much more difficult the serious constructive problem of how best to bridge this gap between learning and doing—between school and a gainful occupation.

In deciding whether or not a child shall go to work little discretion is given to either school or health authorities. The school authorities must issue school records to all children who are qualified. They are, it is true, sole judges of whether or not a child has actually met the educational requirements of the law for a school record, and must issue a school record only after "due investigation and examination." But if a child has completed the sixth grade, and has attended school the requisite number of days, the school record must be issued, under a strict construction of the law, "on demand," regardless of whether or not the child intends to secure an employment certificate and go to work. In other words, though a child under 16 must go to school unless he is "regularly employed," the law makes it difficult for the school authorities to say that he shall be given a school record only after he has secured a promise of employment.

As for the discretion given to health officers to withhold certificates in individual cases, the law provides that a certificate "shall be issued" on application of the child's parent, but that it shall not be issued until the school record and legal evidence of age have been "received, examined, approved, and filed" and the child has been examined and has been found to be "in sound health" and "physically able to perform the work which it intends to do." Over the school record the issuing officer has no control whatever, except to see that it is "properly filled out and signed." As for evidence of age, he must accept birth certificates, certificates of graduation accompanied by school records, passports, or baptismal certificates unless he has reason to suspect their validity, but any other evidence of age not only must be valid but must be of a kind that he considers "satisfactory." In most cases he is allowed probably his greatest degree of discretion in determining whether a child's physical condition justifies him in granting a certificate.

Another weakness in the method of administration specified in the employment-certificate laws of New York lies in the fact that, except in factories, no uniform method of enforcement throughout the State is provided. Local school-attendance officers, it appears, must enforce not only the provisions of the education law relating to school attendance but also certain of those relating to employment and school-record certificates. The labor law is enforced in factories

throughout the State by factory inspectors and in mercantile and other establishments in first and second class cities by mercantile inspectors of the State department of labor. But outside of first and second class cities inspection for violations of the mercantile law is a power, not a duty, of local health officers, with no provision whatever for State supervision. For the inspection of mercantile and all nonfactory establishments in places of less than 3,000 inhabitants, moreover, no provision is made in the law.

The most serious defect in the administration of the New York child-labor laws, however, is probably the lack of supervision by any State agency adequate to insure uniformity in methods and standards. The State department of education has supervision over school attendance and over the educational requirements for a certificate. It prepares the form of school record to be used, and this form is approved by the State industrial commission. But as a matter of fact, when this investigation was made the school records used in 1 of the 6 second-class cities and in 6 of the 24 third-class cities from which reports were received differed in some important respect from the approved form.

The supervision over the issuing of employment certificates given by the law to the State industrial commission apparently might be made effective, but it has not been so in actual practice. Though since October, 1913, the department has had access to all records in issuing offices and has had authority to inquire into methods of issuing certificates, its reorganization in that year and again in 1915 when it was placed under the jurisdiction of the newly created industrial commission has tended seriously to delay the practical exercise of its powers of supervision. Even the reports of certificates issued and refused and the physical-examination blanks which the law states must be sent every month to the department of labor are sent by many offices irregularly; and when they do not come the department does nothing until the end of the year, when it notifies the health officer to send them. As for the power of the department of labor to require physical examinations of children at work and to revoke certificates on the basis of such examinations, this is rarely used.

*Methods of securing certificates.*—Owing to the complexity of the law and to the lack of State supervision, the procedure that the child is obliged to follow in order to obtain an employment certificate varies widely in different places. In some cases, as in the matter of the appearance of the parent in person and in the matter of the literacy test, these differences are due to ambiguities in the law which are differently interpreted by local officials. In other cases they seem to be due to failure rigidly to enforce plain requirements of the law.

The latter is true, as later discussed in detail,<sup>1</sup> of the character of evidence of age preferred or required to be brought by the child.

The number of trips and the length of time necessary to procure a certificate depend in large part on the city or village in which the child lives. Lack of information as to the requirements for securing a certificate frequently necessitates additional trips. Except in New York City and Rochester no printed instructions are issued, though in other places the children in certain schools are sometimes told, particularly at the close of the school year, how to secure certificates. Sometimes, especially in the smaller places, the child is obliged to return for his physical examination because his first visit was not during the office hours of the examining physician. In Victory Mills practically every child must make at least three trips, two to the office of the clerk of the board of health and one to the health officer in Schuylerville, a mile away. Whenever the parent makes affidavit to the child's age elsewhere than at the issuing office, the child generally has to come first to the office for the blank affidavit form and to return later with it filled out. On the other hand, wherever the parent is always required to appear at the certificate office, as in New York City, Utica, and Little Falls, or always when required to make affidavit as in Troy, Syracuse, and Cohoes, this requirement is likely to result in additional trips for the child, as it is frequently not understood, particularly where the parent must appear in some cases but not in others. In Syracuse a child is obliged to make an additional trip by reason of the fact that he must obtain a school record blank at the issuing office to take to his school principal.

Delays in securing certificates may be occasioned by two other causes; first, difficulty in securing school records during vacations, and second, lack of a birth or baptismal certificate, a school diploma or a passport as evidence of age. Even in cities where the school superintendent issues school records—i. e., cities which have a population of 5,000 or over, other than first and second class cities—though his office is generally open the entire year, he can give children school records during vacations only if provision has been made by the various schools, public and private, for depositing with him the school records of all children who may wish to go to work during the vacation. In first and second class cities and in places of less than 5,000 population the difficulty is greater because the principals of schools who must issue school records usually have no office hours and frequently go away during vacations. To overcome this difficulty in New York City and Buffalo the children in many schools are told to secure their records before school closes if they wish to go to work during vacation. In Rochester a better plan is used. There the

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<sup>1</sup> See p. 90.

records of children who think they may wish to go to work are made out except for the date and filed in the office of the efficiency bureau, where they can be procured at any time. This plan, however, does not apply to parochial-school children.

Delays due to efforts to secure the best possible evidence of age are a necessary safeguard to the child. Wherever the law is strictly interpreted and children born abroad or outside of the city in which they are applying are obliged to send for transcripts of their birth certificates, the issuing of the employment certificate is necessarily delayed for whatever length of time—sometimes a month or more if the letter must go to a foreign country—may be required to receive a reply. If a child in a first-class city is obliged to have a physicians' examination to prove his age, he must wait, as has been noted, 90 days.

A child who presents "other documentary evidence of age," moreover, is theoretically obliged to wait for its approval by the board of health. In some places a delay of as much as two weeks may be thus caused. In Rochester and Little Falls, however, "other documentary evidence of age" is accepted at once by the issuing officer. In Rochester the health bureau never acts upon such evidence, and in Little Falls a certificate would be revoked, it is said, if the board later declined to accept the evidence of age offered. But in neither city does the procedure seem to be in strict fulfillment of the law, which prescribes that the issuing officer—when satisfied that the applicant is over 14 and that he is unable to produce a birth or baptismal certificate, a passport, or a school diploma—shall present a statement of the facts, together with whatever other documentary evidence is available, to the board of health, and that at a regular meeting the board of health may by resolution provide that this evidence shall be received. In other words, the delay which the law requires in cases of this kind is eliminated in the procedure of the issuing offices in Rochester and Little Falls.

Delay in securing a certificate is not only an inconvenience to the child but not infrequently the cause of a break between his school life and his working life. When the child secures a school record and applies for an employment certificate he has decided to leave school; and, even when notice of delay in securing a certificate is sent to the school authorities, it is difficult to induce him to return. Attendance officers, moreover, knowing that he will soon leave school permanently, often do not think it worth while to make a great effort in his case. The plan followed in some schools of not giving a school record nor allowing a child to leave school until he has secured satisfactory evidence of age obviates a large part of this difficulty. This requirement, though not a provision of law, apparently could be made

general, for the child is not entitled to a school record unless he is 14 years old.

The requirement of a fee for a copy of a certificate to replace one which has been lost, as practiced in New York City and Buffalo, seems a hardship to the child who has actually lost the document, particularly as the employer can not be compelled to pay the fee, even when he himself has lost the certificate. The plan in use in Rochester of penalizing the child by making him wait a week unless he can bring a statement from the employer to the effect that he lost the certificate or that he wishes to employ the child at once is probably quite as effective and more just. In this connection it should be noted that additional protection against the misuse of duplicate certificates is provided by the method in use in New York City and Buffalo of having such certificates clearly labeled as duplicates. But the problem of duplicate certificates can not be completely solved so long as certificates are given to the children instead of directly to their employers.

The office procedure itself seems in some places to be unnecessarily complicated and confusing. In the Manhattan office, for example, the child frequently is obliged to be interviewed by as many as four people, and sometimes more, and often he is interviewed several times by the same person; the office is not so arranged as to make the order of these interviews clear and simple; the child does not reach the clerk who has power to accept or reject documents until the very end; he goes through all the rest of the procedure before the literacy test is given; and the forms, particularly different forms for transcribing various kinds of evidence of age, and the many stamps in use seem unnecessarily numerous and complicated. Even when the child brings all requisites, he and his parent may be in the office over an hour before the certificate is issued. The very fact that an average of 75 applicants present themselves daily at the Manhattan office shows the need for as simple and systematic a procedure as is consistent with absolute assurance that the legal requirements have been fulfilled in every case.

That in Buffalo the office procedure is simpler and better organized is due largely to the greater authority given the first interviewer, which results in clearing the office rapidly of all children except those waiting for the physical examination—the final step before the certificate is issued. The New York City and Buffalo offices were the only ones visited which in their procedure adhered strictly to the letter of the law.

In Rochester, though no one can justify failure to follow law, the children are handled in a dignified, orderly way, are made to feel the importance of the occasion, and are given more deliberate and

thorough instruction than is customary in other offices. Applicants usually appear with the requisites, owing, probably, to the efficiency of the school system as well as to that of the bureau of health. Moreover, the extralegal requirements are such that the statement is justified that children go to work as well equipped as from any office in the State.

In no issuing offices visited outside of those in first-class cities was there thorough familiarity with the requirements of the existing law. In Rochester the departures from legal requirements appear to be deliberate efforts to secure more practical protection for the child at less cost to him than is required by law. But outside the first-class cities no issuing officer seemed to be aware that a certificate of graduation is acceptable as evidence of age, that a parent's affidavit must accompany any evidence of age except a birth record, or that a parent's affidavit unaccompanied by any other evidence of age is not acceptable, and—except in Albany—it seems never to have occurred to any of the issuing officers that the law requires a literacy test to be given by the officer who issues a certificate. In fact, in the smaller cities practically no office visited was operating under the provisions of the present child-labor law.

Lack of adequate supervision by any State agency makes possible not only these wide differences in interpretation and even in knowledge of the law, but also many differences in the form and size of employment certificates. Though the actual requirements as well as the forms differ widely, an employment certificate made out in one part of the State is good anywhere else in the State. The law provides that the blank forms for certificates and school records shall be "approved" for first and second class cities and both prepared and furnished for all other places by the industrial commission. Yet 1 out of the 11 places visited during this investigation, and 2 out of 23 other places, used old forms which are not based on the model approved by the commission and do not conform to the present law. In some places only one copy of a certificate is made, a record of the essential facts being kept on a stub; in other places two copies are made, one for the child and one as an office record; and in still other places three copies are made, one for the child, one as an office record, and the third to send to the State department of labor as a report of the issuance of the certificate.

*Evidence of age.*—The law prescribes exactly what evidence of age shall be accepted and the order of preference of various documents. Yet of the issuing offices studied, only those in New York City and in Buffalo demanded the documents in the order prescribed by law; and the extralegal requirement in New York City that the parent's affidavit shall always be taken, regardless of the character of evidence



submitted, left Buffalo the only place where the exact legal procedure was followed.

The only offices visited where foreign-born children were always required to send for transcripts of birth certificates were those of New York City, Buffalo, and Tonawanda. In all the other offices baptismal records, passports, and other documents were frequently accepted when birth certificates could easily have been procured. In Rochester birth certificates, baptismal records, and passports appeared to be regarded as equally acceptable, but particular attention was paid to physiological age which the health officer considers of more importance than the exact date of birth. In Rochester, Albany, and Syracuse passports from countries where birth certificates were available were commonly accepted, and foreign-born children were only occasionally required to send for the preferred documents. In Troy, Utica, Cohoes, Little Falls, and Victory Mills no effort was made to have foreign-born children procure birth certificates.

In Cohoes, Little Falls, and Victory Mills, owing to the fact that the birth certificates are kept by clerks of the boards of health who have other and more pressing duties and consequently often find it impossible to consult the records when asked, birth certificates frequently are not required even of children whose births are registered in those places. Thus birth certificates as evidence of age are made practically unavailable for the very children for whose benefit in large part these communities maintain their systems of birth registration. The remedy lies, not in permitting fees for a search of the records in such cases, but in making it the legal duty of all registrars to examine their records upon the request of applicants for employment certificates.

In many places, even when a child is told to write to another city or to a foreign country for a transcript of his birth certificate, he is given no instructions as to whom to address or what fee to send; and only in New York City and Buffalo is evidence demanded that he actually has written. The methods used in both places, however, are open to objection. The registry receipt demanded in New York City proves that the child has written, but nothing prevents a child from concealing the receipt of a reply which might show him to be under age. On the other hand, the Buffalo method of compelling a child to wait until he can produce a certificate or a returned letter seems an undue hardship upon the child by placing him at the mercy of careless or indifferent officials.

At the time of inserting in the law the provision that a certificate of graduation should be preferred as evidence of age to a passport or baptismal certificate if the school record showed the child to be over 14 years of age, it was believed that this provision would furnish the

child with a special incentive to complete the elementary school course before going to work. Little evidence can be found, however, that this provision is of any practical value and, as the child's age does not appear on the diploma, it practically amounts to the acceptance of a school record as evidence of age in the case of grammar-school graduates. As a matter of fact the requirement of a school diploma as evidence of age in preference to a baptismal certificate, passport, or any other documentary evidence except a birth certificate, is unknown outside the three cities of the first class and is frequently used there in a way which appears not to have been intended. In Queens Borough, for example, a child born in New York City applied with a card showing his birth was not recorded, a baptismal record, and a school diploma. Instead of demanding a school record and accepting the diploma as evidence of age, in strict accordance with the law, the diploma was accepted as the school record and the baptismal record as evidence of age—a logical if not a legal procedure. Only thorough State supervision and instruction of issuing officers could make this provision of any practical value.

The examination for a physicians' certificate of age, as permitted in first-class cities, must necessarily show not only whether a child has probably reached a certain chronological age, but also whether he "has reached the normal development of a child of [his] age"—a requirement for all children regardless of the evidence of age furnished; and if physiological age could be determined by proper standards, it certainly would be a good supplementary measure of the child's fitness for work. But without such standards and without any method of correlating physiological and chronological age the physicians' certificate amounts simply to adding to a physical requirement which, if literally interpreted, is applicable to all children, a physician's guess as to the chronological age of the particular child who can not produce documentary evidence. It means, moreover, that a child who would not be allowed to go to work on the guess of one set of official physicians would have no difficulty in securing a certificate from a set in another office. The period, however, which must precede the granting of a physicians' certificate serves to make children and parents leave no stone unturned to secure some form of documentary evidence of age.

Parents' affidavits alone appear not to be acceptable under a strict interpretation of the law, but must accompany documentary evidence other than a birth certificate, school diploma, baptismal record, or passport. The parent's affidavit, moreover, is primarily an affidavit that better evidence of age than that offered can not be procured and is only secondarily an affidavit concerning the age of the child. As a matter of fact, the greatest confusion prevails as to when parents' affidavits are required and when not. In New York

City a parent's affidavit must accompany any evidence of age whatever. On the other hand, parents' affidavits unaccompanied by any other documentary evidence are constantly accepted in Albany, Troy, Utica, Syracuse, Cohoes, and Victory Mills. In Cohoes and Victory Mills, though baptismal records could be easily secured because most of the applicants are Catholics, they are not asked for, and parents' affidavits without supporting evidence are accepted as a matter of course.

Theoretically a child in other than a first-class city—where a physicians' certificate of age is acceptable—who has no documentary evidence of age can not secure an employment certificate. But practically the acceptance of parents' affidavits is so general that Tonawanda and Little Falls were the only places investigated outside of first-class cities where a child could not in actual practice secure a certificate without some other form of documentary evidence of age.

In general, because of lack of State supervision, children are going to work in New York State, in spite of excellent legal provisions, on the widest possible variety of evidence of age. The same child who, if he applied in New York City, would be required to produce either a birth certificate or proof that he could not secure one, in Cohoes would have to present merely an affidavit signed by his parent. If he came to any one of the New York City offices, his evidence of age would be stamped to show that it had been used, and he would be unable to pass it on for use by a younger child; but this would not be done anywhere else in the State. If he received his certificate in Buffalo or Rochester, the date of birth on it would be perforated to prevent effacement in an effort to appear over 16 and therefore not subject to the law regulating hours; but if he received it anywhere else in the State, the date of birth would simply be written.

An effort is now made in New York City to have a child bring satisfactory evidence of age when he first enters school. If this were generally done, the child would not have so much difficulty in proving his age when he wished to go to work. Such evidence is more easily secured when a child is young and less incentive to falsify age exists. There is, however, difficulty in the strict enforcement of such a regulation; for though under the compulsory education law a child may be debarred from leaving school, he could hardly be debarred from entering school because of lack of evidence of age. Nevertheless, in the great majority of cases the evidence of age can easily be produced when the child enters school, and a regulation of this kind would be a decided assistance in proving the child's age when he wished to go to work.

*Physical requirements.*—As in the matter of evidence of age, the lack of any centralized supervision over the physical requirements for an

employment certificate in New York State has led to a wide variety of standards for the child who is entering industry. Though the law requires that a child to be granted a certificate must be in "sound health," instead of in "sufficiently sound health," as in most States requiring a physician's certificate, the physical examination, except in Rochester, is given in so short a time that it is doubtful whether any but the most obvious defects are detected. The points to be covered in an examination are determined by the State industrial commission, but the instructions for giving the examination issued by the department of labor are totally inadequate to secure uniformity of standards as to the nature or degree of defect for which a certificate shall be refused. As a result children are allowed to go to work in one community with physical defects which in another would be considered serious enough to warrant refusal of a certificate. In practice the individual examining physician establishes his own standard of "sound health," and no uniformity in the physical condition of working children is maintained in the State.

In New York City the department of health has attempted to establish tentative minimum standards of height and weight which an applicant must attain before he is considered to have "reached the normal development of a child of its age." No similar standards were found in any of the other offices investigated.

As for the child's being "physically able to perform the work which it intends to do," in most places the examining physician makes no inquiry whatever into what the child intends to do, and under the existing law such an inquiry would serve no purpose. As the physical examination is given only when the child first goes to work and as he may have a dozen occupations before he is 16, this provision is generally held to mean, indeed, that he shall be physically able to do any work which is legal for a child under 16. Even in the offices where information is secured as to what the child expects to do—i. e., in Rochester, Albany, Cohoes, Little Falls, and Victory Mills—this information relates only to the first job, and the examining physician has no means of knowing whether the child will keep that position for more than a day or a week or where he will be employed afterwards. Nor has the examining physician any legal power to tell the child that he may not enter this occupation but that he may enter another. As a result, knowledge of the work which the child in the first instance "intends to do" has little or no effect on the character of the physical examination. Even if the examining physician attempted in each case to consider the kind of work proposed, his acquaintance with the demands made by different occupations on the strength and vitality of children is generally too meager to permit of valuable discrimination. In New York State, therefore, enforcement of the pro-

vision that the child must be "physically able to perform the work which it intends to do" is made impossible by the fact that the physical examination is made only before the first position.

Medical inspection of schools, though new and incomplete, is general in the larger cities of New York State, and it would be easy for the examining physician at the certificate office to have the benefit of all information secured in the schools as to the physical condition of applicants for employment certificates. But in only one place visited—Rochester—is any effort made to correlate the certificate office examination with the school examination. The requirement in Rochester that a child applying for a certificate shall bring a health-record card showing the results of his school examinations ought to be in force in every city in the State. If necessary the law should be amended to this end.

Withholding certificates until minor physical defects are corrected has the excellent result that, by furnishing an economic motive for soundness, it induces many children to secure treatment for defects which otherwise would be neglected. The extent to which this can be carried without undue hardship to the child and his family depends, of course, upon the opportunities which the given city offers for free medical treatment. If there is a dental dispensary capable of accommodating all applicants, the rule in force in Rochester, for example, that no child with defective teeth shall go to work, seems a reasonable interpretation of the law; for physicians state that no child with defective teeth can be in perfectly "sound health."

Additional protection is furnished the child who is either temporarily or permanently refused a certificate by the follow-up work of school nurses to whom such cases are referred in New York City and Buffalo. In the other places the refusal is a warning to the child's parents and a protection from a specific danger. Where medical inspection of schools exists the child remains under the care of the school physician. The value of the examination to the child who is found physically unfit for work depends largely, of course, upon whether or not some one supervises what he does in place of the contemplated work and sees that he receives whatever treatment he needs.

The most serious defect in the physical protection of working children in New York State, however, lies in the lack of any effective supervision after they have entered industry. The certificate office merely opens for the child the door to wage earning. It has no legal right to inquire what happens to him after he has passed through that door.

When it is remembered that physical defects and weaknesses may become apparent only after a child has been tested by the strain of work, and also that young children are particularly liable to suffer

specific injuries as the result of certain occupations, this lack of complete provision for medical supervision during the early years of the child's industrial career seems a very serious matter. The medical inspectors of the industrial commission may require any child employed in a factory to have a physical examination, and the child's employment certificate may be revoked if he is found in bad condition. But the power of the medical inspectors to require children in factories to have physical examinations is so rarely exercised as to be of little or no practical value. And for a child employed anywhere else than in a factory no provision is made for physical examination after entering industry.

*Educational requirements.*—The sixth-grade requirement of the New York law constitutes an unusually high educational standard. Here again, however, lack of control by any central State agency leads to material differences in standards in different places. First, there is the usual difference in standards among schools, especially among unsupervised private and parochial schools. In first-class cities the law does not even provide for the countersigning, by the superintendent, of school records issued by the principals of such private and parochial schools. Second, there is the lack of uniformity in the interpretation of what is meant by completion of "the work prescribed for the first six years of the public elementary school or school equivalent thereto or parochial school."<sup>1</sup> The interpretation given to this phrase by the chief of the compulsory-attendance division of the State department of education, in answer to an inquiry from the Children's Bureau, was as follows:

This department holds that when a child has gone down through the grades, as outlined in the Elementary Syllabus, to the end of the sixth grade, he has met the educational requirements for a school-record certificate. The word "completed" is not interpreted to mean that the child shall have passed an examination out of the sixth grade, or any other examination, but that he has gone through the work of the first six years of the public elementary school or school furnishing a course of instruction equivalent to the course maintained in a public school. The reason why the child is not required to pass an examination is the fact that examination papers in rural schools are examined by the teacher in charge of the school; and, as there are about 10,000 variable standards of marking examination papers, the child under the marking of one teacher might be able to pass out of the sixth grade into the seventh, and fail if he were marked by teachers in other schools. We therefore hold that the word "completed" in the statute is not to be interpreted as referring to the passing of examinations.

This interpretation, however, is not generally known throughout the State, and in many cities where it is known superintendents are unwilling to follow it, holding, as seems more reasonable,

<sup>1</sup> Labor Law, secs. 73 and 165. For the text of these sections see pp. 122, 124. An amendment to the law, effective Feb. 1, 1917, requires that a child under 15 years of age must have completed the eighth grade. Acts of 1916, ch. 465. For the text of this act see Appendix, pp. 132-133.

that the legislature intended that a child should not go to work until he was able to pass an examination out of the sixth grade. As a result the actual educational acquirements of children leaving even public schools for work differ according to the locality. A child who lives in New York City, Utica, Little Falls, or Victory Mills must have been graduated from the sixth grade. But one who lives in Buffalo, Albany, Syracuse, or Tonawanda needs only to have sat for two years, and in Rochester, Cohoes, or Troy for one year, in a sixth-grade classroom.

Though the law provides that the form of all school records used in first and second class cities must be approved by the industrial commission and that all those used in other cities, towns, or villages must be furnished by this commission, the supervision thus made possible has been delegated by the commission to the State department of education and has never been effectively exercised. As a result, not even a standard form of school-record blank is in use throughout the State. Out of 17 third-class cities from which blanks were secured but which were not visited the school-record form used in 6 did not mention the sixth-grade requirement.

Even in the same public-school system central supervision is not always maintained over the issuing of school records. Lack of uniformity is practically inevitable, indeed, under a law which in one section<sup>1</sup> places upon the principal of each school the responsibility for issuing school records anywhere in the State, and in another section<sup>2</sup> places it upon the same officer in first-class cities and in school districts having less than 5,000 population and upon the superintendent of schools in other cities and school districts. It is not at all surprising to find that at least in the first-class cities, where according to both sections of the law school records are issued by the individual principals, the educational standard for these records differs widely according to the ideas of the various persons who issue them. In New York City, though examinations for school records are given by the principal of one school in each district, nominally under the direction of the district superintendent, no provision is made for uniformity of or for central supervision over the district examinations. In Buffalo no central control is exercised over promotions and no central office is notified when children leave school.

Under such a law, moreover, it is not surprising that in at least one city, Syracuse, where school records are supposed under the more recent amendment to be issued by the superintendent, the principals should be issuing them. Nor is it surprising that in all the

<sup>1</sup> Labor Law, sec. 73. Sec. 165 also makes the same provision. For the text of these sections see pp. 122, 124.

<sup>2</sup> Education Law, sec. 630, subsec. 2. For the text of this section see p. 128.

other cities included in this study where the superintendent signs school records, except Troy, Little Falls, and Tonawanda, he keeps in his office no register of the standing of individual pupils and therefore must depend wholly upon the statement of the principal as to the grade of an applicant for a such a record.

In some schools in New York City and Buffalo children have been coached in special classes in order to enable them to reach the educational standard for a school record. Under the present law such a class is legal only if it provides better methods of instruction and not if its course of study differs in any way from that of the regular sixth grade. In these classes, however, particular attention is usually paid to the so-called "essentials"—reading, writing, spelling, English grammar, geography, and arithmetic. And the very existence of such a class shows a frank and open desire to assist children to leave school for work.

In other schools, undoubtedly, especially in New York City but also in Buffalo, a child sometimes is shoved up, without any special coaching, from grade to grade, until it is made falsely to appear that he is entitled to a school record. Even the special examination given in New York City before a school record is issued, the purpose of which is to bring about uniformity of standards, does not always accomplish this purpose because ratings are sometimes modified and because the examinations themselves are not uniform, being in some cases adapted to fifth rather than to sixth grade pupils. In Rochester, it is said, an effective check is placed upon pushing up through the grades by the fact that duplicate records of each child's ratings are sent to the efficiency bureau at the end of each semester. But in New York City, though formerly similar records were kept in the office of the bureau of attendance, they were never used as a check.

In general it is safe to say that where no supervision exists over the issuing by principals of school records children can be easily pushed up through the grades so they can go to work when of legal age, and that this is very likely to be done when occasion arises. It is not uncommon in the congested districts of New York City and Buffalo to find a parent beseeching the principal of a school to let his child go to work. If there seems to be exceptional economic pressure in the home, or if the child is backward or troublesome, the principal is seriously tempted to yield to these entreaties and to give the child a school record. This action, however, not only deprives the child of the education to which the community has decided he is entitled before assuming the burden of self-support, but as it is done with his full knowledge it tends to diminish his respect for law.

The requirement of 130 days' school attendance either during the 12 months preceding the child's fourteenth birthday or during the 12 months preceding his application for a school record has been inter-



preted in New York City to mean that a child must secure an employment certificate as soon as he leaves school. In other parts of the State, however, the school-record blanks in use show quite different interpretations of this attendance requirement. The Rochester form, for example, provides only for a statement of the number of days' attendance since the child became 13 years of age. If the child was nearly 16, therefore, the 130 days' attendance entered might either have been scattered over nearly three years or have ended more than two years before his application for a school record.

The New York City interpretation seems to stretch the law in two different ways. In the first place it assumes that the 130 days of attendance must have been during the 12 months preceding application for a certificate, whereas the law says during the 12 months preceding application for a school record. In the second place it assumes that this attendance must always be before application, whereas the law says it can be either before becoming 14 years of age or before application, and fails to specify in which cases it may be one and in which cases the other.

Unless the law is stretched in these ways the requirement seems of little value and may become a great hardship to certain children. For a child who has been living for a year in New York or any other State having a compulsory education law and who has never before held a certificate it is no hardship because it means simply compliance with that law, nor is it a hardship for an immigrant child under 16, for such a child can rarely secure a certificate inside of a year because of lack of knowledge of the English language. On the other hand, this attendance requirement, to which there are no exceptions and which can not be waived as in Massachusetts, may become, if the law is literally enforced, a serious hardship to the child who comes into New York State after having been legally at work on an employment certificate in some other State. Such a child, even if he meets the sixth-grade requirement of the New York law, may not have been in school 130 days during the year before becoming 14 or during the year preceding his application, and so is not entitled to a New York certificate. Yet he has complied with every law of the State where he has lived, and also has attained the educational standard of the New York law.

As for the literacy test required by the provision that the issuing officer, after examination, must file a statement "that the child can read and legibly write simple sentences in the English language," the degree of education required by this provision is so far below that required to obtain a school record that it seems natural for issuing officers to accept the school record as sole evidence of educational fitness for work and to give no examination for literacy. Indeed, a literacy examination is given only in New York City and Buffalo, and in Rochester an arithmetic examination in case the child appears

illiterate or can not readily speak English. Even in these places recognition is shown of the discrepancy between the grade requirements and the test—in New York City by using a third-grade reader for the test, in Buffalo by using a fifth-grade reader, and in Rochester by testing the child in fractions instead of in reading or writing. Naturally the only children refused certificates as a result of such tests as these are children whose school records are virtually fraudulent. Nevertheless the number of refusals in New York City because of failure to pass the literacy test shows the great need for such a test in other cities.

In spite of the legal provision that a school record must be issued on demand "to any child who, after due investigation and examination, may be found to be entitled to the same,"<sup>1</sup> in some cities the school authorities have introduced certain highly desirable extra-legal requirements for obtaining such a record. In Buffalo, for example, no school record is issued until the parent has signed a blank form giving his or her consent and stating the reason for the child's going to work. In Albany, Troy, and Little Falls the child has to prove that he has been promised employment before he is given a school record. This procedure practically means that, whatever periods of idleness he may have later, he goes straight from school to work. In no other place visited, however, is any such method used to prevent the child's securing a school record merely in order to avoid going to school. And the law makes no effective provision for the prevention of this unfortunate break in the child's life.

The New York law makes no exception of children who are mentally defective. Such children, if unable to complete the sixth grade, can not legally go to work until they are 16. In Buffalo, however, retarded children are sometimes given the Binet test and, if found mentally defective, are occasionally permitted to go to work without having fulfilled the educational requirements of the law. The problem thus dealt with is one frequently encountered in other certificate offices throughout the country, but it is doubtful whether this solution, clearly illegal in New York, is one which it would be well to incorporate into law, even if special supervision were to be exercised over these children after they had gone to work. The problem should be considered as primarily one of education and not of labor regulation.

The lack of compulsory continuation schools for employed children and of enforcement of the compulsory evening school attendance law have already been mentioned. The present legal provisions relating to continuation schools do not adequately protect the child, as there is no law requiring that the hours of attendance shall be included in

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<sup>1</sup> Education Law, sec. 630, subsec. 2. For the text of this section see p. 128.

the legal hours of labor. As for evening-school attendance, if the child needs more education than that with which he goes to work, he should be permitted to secure it during working hours at a part-time or continuation school and should not be compelled to spend in a schoolroom the leisure he needs for rest and recreation.

*Enforcement.*—In the actual prevention of employment of children under 14 and under 16 without certificates there is probably almost as great lack of uniformity between cities as in the application of the standards for going to work. Though factory inspectors are supposed to cover the entire State, and mercantile inspectors the first and second class cities, with a fairly uniform degree of thoroughness, these inspectors can not visit establishments often enough—inspections are made usually only about once a year—to do more than a small part of the work of enforcing the child-labor law. The rest must be done by local school authorities, who are expected to see that children once in school stay there until legally released and that children not in school are sent there as soon as possible. If the work of local teachers, attendance officers, census enumerators, and other school officials is not thoroughly done, it is practically impossible effectively to enforce any child-labor law.

To keep children in school it is necessary that all absences be promptly reported, that transfers be reported both by the school which the child leaves and by the one to which he goes, and that attendance officers investigate within a reasonable period every case of absence. This applies to children attending private as well as public schools. In New York City the system devised for keeping children in school is excellent, and the forms for reporting absences and transfers are used by many private and parochial schools as well as by public schools. In Buffalo, although the law gives the permanent census board power "to make such rules and regulations as may be necessary to carry out" the provisions in regard to school attendance, individual principals devise their own methods of reporting both absences and transfers, and some of them make no report to the permanent census board of a child who has left to go to another school. In such a case, if the child did not enter the other school he might stay at home or on the street; or if nearly 14 years of age, he might drift into illegal employment and be found only accidentally by an attendance officer or an inspector. Conceivably the same thing might occur in Rochester, where the school the child is leaving merely notifies by telephone the school to which he is to go of the transfer, leaving it to the latter to notify the efficiency bureau whether or not the child appears. In Rochester, however, it is said that between the check-up systems of the efficiency bureau and of the permanent census board it is almost impossible for a child of school age to escape the authorities. The weekly roll call for changes of address in the

Rochester schools is also of great assistance in keeping track of children. In the smaller cities investigated reports of absences and transfers are made with more or less regularity to attendance officers; but since as a rule no records of individual schools are kept at the office of the superintendent and reports are only occasionally received from private and parochial schools, there is no way of knowing how well school attendance is enforced.

The extent to which school attendance of children not enrolled can be enforced depends on the time attendance officers have for other work than following up reported absences, on their vigilance in this work, on the cooperation of police officers and others, and on the thoroughness with which the school census is taken and its results checked with the school records. In general the school census is of more assistance in enforcing school attendance in the rural districts, where an annual enumeration is made, than in any city except those of the first class, which have permanent census boards. In the other cities, indeed, the census is of practically no use for more than one year in four, because it is taken only every fourth year. This condition should be remedied by an amendment to the law requiring a thorough school census to be taken in every part of the State at least annually.

In the three first-class cities the permanent census boards not only locate children 4 to 18 years of age in order that the school-attendance laws may be enforced but also collect facts relating to the employment of children. This system of census enumeration has been of great assistance in locating children from other parts of the United States and immigrant children of school age not enrolled in any school. It also aids in finding children illegally absent from a school, public, private, or parochial, which does not regularly report its absentees. Permanent census boards, indeed, seem to be needed in other cities.

Too little use is made of the opportunity which the certificate office affords to discover children who ought to be in school. The names of children who receive or are actually refused certificates are generally sent sooner or later by the health department to the school department. But except in the New York City offices it is not customary in the cities visited even to take the names of children who apply at the certificate office without the requisite documents and are sent away without having either received or been refused certificates. Thus an opportunity is lost of locating newcomers to the city who, not being enrolled in any school, may easily go to work without certificates when they find they can not meet the requirements of the certificate law. In the New York City offices, moreover, these names until recently were taken simply as a matter of convenience and were not reported to the school authorities.

One difficult problem is the enforcement of school attendance of children who have completed the grade requirements for a school record. If such a child simply refuses longer to go to school without taking out a school record the parents are, of course, subject to a penalty, though if the child is over 14 years of age it is always difficult to secure a conviction for nonattendance at school. But in many such cases the same measures may be taken as in the case of a certain 14-year-old Buffalo girl. This girl was repeatedly told by the attendance officers that she could not receive her school record when she wanted it unless she returned to school, but attempts to force her back into school were unsuccessful even after court procedure. Several months later, when she applied for a school record, it was not granted and she had to return to school for several months in order to have attended 130 days next preceding the date of receiving the record.

If, however, a child takes out a school record and then fails to apply for a certificate, or if for some reason the granting of the certificate is delayed, the problem is more difficult. In at least one case in New York City the group of children already mentioned who had taken out school records and failed to apply immediately for employment certificates were later refused certificates on the ground that the 130 days' school attendance required by law had not been during the year preceding their applications for certificates. But if the parents had chosen to take the matter into court, it is doubtful, as has been pointed out, whether this interpretation would have been upheld, for as the law now reads the school attendance must have been during the year preceding the child's fourteenth birthday or "his application for such school record."<sup>1</sup> It is even doubtful, as will be seen later, whether in cities or school districts having less than 5,000 inhabitants the parent could be punished in such a case for violation of the compulsory education law.

Breaks between school and work which occur as a result of delay in securing certificates are not uncommon. In New York City, school principals do not report to any central authority the fact that a school record has been issued to a child, although such reports might easily be required by the bureau of attendance and might assist in keeping the child in school. In theory the name of a child is not removed from the school register until the school is officially notified that the child has received a certificate, and the absence of a child with a school record is supposed to be reported like that of any other child. But in practice these children are frequently not kept in school, as principals expect them soon to leave permanently. Cases, indeed, in which children have been out of school for several months before receiving employment certificates can be found by comparing

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<sup>1</sup> Labor Law, secs. 73 and 165. For the text of these sections see pp. 122, 124.

the records of the bureau of attendance with those of the certificate office in New York City. One child, for example, received his school record on November 25, 1914, and his certificate on February 13, 1915; another received his school record on January 21 and his certificate on April 30, 1915. In at least one case in which three months elapsed between the giving of a school record and the granting of a certificate the attendance officer had called almost every week and each time had found the child waiting for his birth record and having his teeth treated.

In other places the same breaks undoubtedly occur. In Buffalo, on account of the lack of effective regulation by the permanent census board, a child who has received a school record may easily drop out of school without the attendance department even knowing about it, for only a few principals report to the board the issuing of a school record. In one week, indeed, it was said that out of 43 applicants for certificates at the issuing office, 13 of whom were refused certificates, in only 4 cases had the permanent census board been notified of the issuing of a school record. In Rochester, on the other hand, not only is the school record withheld until all other requirements for a certificate have been fulfilled, but the efficiency bureau receives word whenever a school record is issued to a child and checks up all records with the reports of certificates issued. But in the second and third class cities visited no regular system of notifying the school authorities of certificates granted or refused was found.

In general it is safe to say that many children do not stay in or return to school during periods of waiting for their certificates, and that to make them do so would be an almost impossible task for the attendance officers. Indeed, only a rigid follow-up system could prevent children from absenting themselves from school after they have their school records. And such a system would seem worth while only if it were for the purpose of making certain that the child passed directly from the school into some sort of profitable work. But if it were once determined that the child had to have a job as well as a certificate before he could leave school, and that he had to keep a job or else return to school, it would seem desirable to educate children and parents to the idea that the school record and the promise of employment were both prerequisites to an employment certificate and that such a promise was a prerequisite to leaving school.

Another difficult problem is presented by children who wish or whose parents wish them to stay at home to help in nongainful ways. The law provides that a school-record certificate shall be issued to any child who has completed the sixth grade<sup>1</sup> and that a child regularly employed under an employment certificate in a city or school district

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<sup>1</sup> Education Law, sec. 630, subsec. 1. For the text of this section see p. 177.

having a population of 5,000 or more or regularly employed elsewhere under either an employment or a school-record certificate shall be exempt from school attendance.<sup>1</sup> Another section says that to be exempt from school attendance a child must be "regularly and lawfully engaged in any useful employment or service."<sup>2</sup>

There is evidence that in many places "any useful employment or service" is interpreted to mean housework or chores at home; that children are often permitted to stay at home for such work on school-record certificates; and that their "employment" varies all the way from household drudgery to idleness. Until the fall of 1913, when the law was amended, this was the interpretation in Rochester; but at that time it was decided that henceforth every child between 14 and 16 must be in possession of an employment certificate or be in school. In Rochester, therefore, as would be expected, approximately the same number of employment certificates are regularly granted in a given time as the number of school records issued by all the public, private, and parochial schools. From September 1, 1913, to July 1, 1914, for example, 1,315 employment certificates and only about 762 public-school records were issued, the remaining certificates being granted on records from private and parochial schools. In Albany, on the other hand, during the same period only 299 employment certificates but 483 public-school records were issued; and in Troy, from October 1, 1913, to July 1, 1914, the reports showed 131 certificates and 137 public-school records. As in both Albany and Troy a considerable number of children with parochial-school records must have been granted certificates, it is evident that many children in these cities secure school records who do not at once secure certificates or enter any gainful employment. These children may later go to work illegally.

Staying at home on a school record alone is plainly contrary to the compulsory education law in any city or school district having a population of 5,000 or over, but does not appear to be so in the smaller places if a child can show he is engaged "in any useful employment or service." A child who holds an employment certificate anywhere in the State may stay out of school to work at home as well as in a gainful occupation.

As for unemployed children, or those who hold certificates but are not at work, though the compulsory education law requires that such children shall be in school, the certificate law contains no provision which could aid in the enforcement of school attendance. When a child has left the office of the department of health with his employment certificate he is still responsible to two officials, the factory inspector if he is employed and the attendance officer if he is not

<sup>1</sup> Education Law, sec. 624. For the text of this section see p. 126.

<sup>2</sup> Education Law, sec. 621. For the text of this section see p. 125.

employed; but in both cases the officer has to catch the child before he can exercise in any effective way his authority. Unless a factory inspector or an attendance officer happens to come his way the child is free to do as he pleases—work in any occupation, legal or illegal, or loaf on the streets. He carries his license to work in his pocket and, if he finds a job, gives it to his employer to keep until he quits, when he may put it back in his pocket or may carry it to another employer. No public authority is notified when he begins work or when he stops, and no public authority knows where he is or what he is doing. If an attendance officer challenges him on the street, he produces his certificate and claims to be hunting for work; and generally the attendance officer tells him merely that if he does not find a job soon he must return to school. But the attendance officer has no means of knowing when or where or whether he finds work. In New York City the bureau of attendance attempts to see that when a child receives a certificate he goes to work, but it has no means of knowing how long he continues to work, whether a day or a week or a year. The same thing is true in the other cities where the child must have a job before securing a certificate. In other words, the child, when he leaves the health office with his certificate, has practically escaped from any effective supervision by the school authorities who up to that time have bounded his horizon.

In spite of this lack of provision for knowing when children are out of work, unemployed children are sometimes returned to school by vigilant attendance officers. In New York City a special continuation class for unemployed boys is maintained in one of the elementary schools, but most of the boys attending are over 16 years of age and attendance is voluntary. In Buffalo unemployed boys under 16 are sometimes put in the special employment-certificate class. But outside of the first-class cities it seems to be generally considered that an employment certificate is itself a license to stay out of school, and in the other cities investigated no attempt is made to return unemployed children to school. Whatever effort is exerted anywhere to return an unemployed child is perfunctory, because the attendance officers know that if they take such a case into court the judge is almost certain to hold that the child must be given an opportunity to hunt for work and that a violation of school attendance under such circumstances is purely technical.

Proper provision for the unemployed child in the school system would, of course, make it much easier as well as better worth while to send such children back to school. But it should not be forgotten that permitting these children to stay out of school is a plain and direct violation of the law which says that, for exemption from school attendance, the child from 14 to 16 years of age must not only hold a certificate but must be "regularly and lawfully engaged in any



useful employment or service." <sup>1</sup> If the law is to be enforced, the problem of the unemployed child must be faced.<sup>2</sup>

Industrial inspection is at best an incomplete method of enforcing a child-labor law. Children move so often from place to place that no reasonable frequency of inspection is a guaranty against illegal employment. In New York State experience has shown that an inspector himself must see a child working illegally to have an adequate basis for prosecution. In large establishments inspectors do not have time to look up each child and find his certificate, but can make a test only of a sample of the children who appear to be under 16 years of age. The child's signature on the certificate, however, is a help in identification and assists the inspectors in their work.

One of the important problems of inspection is, of course, what action to take when a child is found who is suspected to be under 16 but claims to be over that age. If the inspector challenges the ages of a considerable number of children in an establishment it not only antagonizes the employer toward the child-labor law but is likely to lead to the discharge of children who later may be found to be over 16 and legally employed. It is because of this danger of unnecessary hardship to the child, as well as to secure evidence of violation, that inspectors in doubtful cases themselves often undertake to secure evidence of the ages of the children instead of serving the legal notice which requires that the employer within 10 days either furnish such evidence or discharge the child. In any event it depends upon the judgment of the individual inspector whether or not the age of any child is challenged.

One hindrance to strict enforcement of the law, indeed, is lack of any uniform provision for issuing statements of age to children over 16. In New York City such statements of age are issued, but nowhere else in the State is there any provision for documentary evidence of the ages of children who are over 16. The simplest way to prevent an employer's evading the law by hiring a child whom he states he believes to be over 16 and discharging the child when the inspector challenges the age is to require employers to keep on file for older children, perhaps for all minors, statements of age issued by some responsible agency upon the same evidence of age as is required for an employment certificate. Inspectors could then demand either employment certificates or statements of age for all children up to whatever age might be determined upon as likely to cover all

<sup>1</sup> Education Law, sec. 621. For the text of this section see p. 125.

<sup>2</sup> It has been suggested in New York City, first, that employers be required to send to the bureau of attendance a notice of termination of employment for each child; second, that attendance officers inspect monthly all places of employment and check up the lists of children to see what children have left and to force an explanation from employers who fail to report the names of children who have left their employ; and, third, that as a further means of discovering changes of employment made by children employers be required to enter on the back of each employment certificate before returning it to the child the dates of beginning and of terminating employment, the character of the work, and their own names and addressees.

suspicious cases. But if an employer is held rigidly responsible for knowing the age of any child employed and if instead of merely being required to discharge the child he is penalized when one is found without a certificate, employers themselves will desire such certificates of age as a means of self-protection.

Though probably children under 14 are not often employed in large manufacturing establishments in New York State, it seems likely that the certificate law may be violated frequently and in all places by two classes of children between 14 and 16 years of age; first, newcomers to the State, especially foreigners; and second, other children who have escaped from the jurisdiction of the school by securing employment certificates but who try to avoid the legal disabilities of their age by pretending to be over 16. As one of the supervising inspectors says: "A child between the ages of 14 and 16 years frequently fails to acknowledge that he has an employment certificate or even states that he has none and represents himself to the employer as over 16 years of age. He may claim to be unable to secure a birth certificate, school record, or record of any kind by which to identify himself or establish his age in order to work longer hours, obtain higher wages, or be allowed employment on machinery. When such cases are found by the inspector the only option the inspector has, in justice to the employer, is to require proof of age or dismiss the child within 10 days of notice, the result being in most cases that the child hires out at some other establishment and awaits detection again."<sup>1</sup>

Except in factories and in mercantile and other establishments in first and second class cities there was found no industrial inspection in the places visited, and only school-attendance officers, who are at best little interested in what occurs during vacations and outside of school hours, concern themselves with the employment of children. The labor law, in fact, does not provide for supervision by any central agency over the inspection of mercantile establishments in other cities and in villages of 3,000 or over, and the State department of labor has no more authority to demand that such inspection be made than has the State department of health. For inspection of mercantile establishments in villages of less than 3,000 no legal provision whatever exists. It seems safe to say, therefore, that outside of first and second class cities little is known in regard to the employment of children anywhere except in factories.

*Summary.*—Lack of uniformity between cities due to lack of State-wide supervision is so conspicuous in the administration of the New York child-labor laws that it is difficult to say what are the strong or weak features of the system as a whole. In spite of repetitions and even contradictions and ambiguities in the law, the standard set is high; the evidence of age required seems adequate; the physical ex-

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<sup>1</sup> Thirteenth Annual Report of the Commissioner of Labor, State of New York, 1913, p. 47.

amination must show not only that the child is in "sound health" but that he is physically able to do the work proposed; and the requirement of completion of the sixth grade<sup>1</sup> is an unusually high educational standard for the employment of children under 16 years of age in a large industrial State.

These standards probably are as rigidly enforced as could reasonably be expected in many places, including New York City, which contains more than half the working children of the State, and where the foreign element makes the problem particularly difficult. New York State had in 1910, however, over 60,000 working children, and, as has been seen, in most of the cities included in this study the methods of administration in use were found to have both good and bad features. If all three of the first-class cities, where private agencies have done much to secure efficient enforcement, were assumed to have developed the best possible methods under existing laws, the fact would still have to be faced that in 1910 New York State had over 18,000 working children 14 and 15 years of age—not far from double the entire number of gainfully employed children in Connecticut in that year—scattered among second and third class cities and towns and villages and protected only by the methods, sometimes good and sometimes bad, in use in these smaller places. Even if all the children working in agricultural pursuits and all those working in personal and domestic service outside of the first-class cities are deducted, New York State in 1910 had over 10,000 children at work in other gainful occupations elsewhere than in first-class cities—about the same number as were engaged in all gainful occupations in the entire State of Connecticut. All these children, as well as those in first-class cities, are dependent for protection upon the State child-labor laws and their efficient enforcement.

The trouble is that in one city the administrative machinery breaks down at one point and in another city at another point. In some places parents' affidavits are regularly taken as evidence of age; in some the physical examination is merely perfunctory; and in some the sixth-grade requirement is sometimes nullified in practice by showing children up in grades and by other means. In short, the lack of careful supervision by any central office means that the high legal standards set for entering industry are so unevenly enforced that it is impossible to point out any one uniformly strong feature of the system as a whole.

The first, and perhaps greatest, need in New York, therefore, is machinery for securing uniformity throughout the State on three points: First, evidence of age; second, physical condition; and third, educational attainments. Under the present system such uniformity can be secured only by cooperation among three separate departments

<sup>1</sup> This provision has been amended by Acts of 1910, ch. 464. For the text of this act see pp. 132-133.

dealing with health, labor, and education. A curious feature of the situation, moreover, is that, though the health department has jurisdiction over evidence of age, the labor department practically determines the minimum number of points to be covered in physical examinations given by health officers. If health officers are to issue employment certificates, it certainly would seem more logical for the State department of health to supervise not only evidence of age, which rests upon vital statistics, but all matters relating to the physical examination. The issuing officers should also have power to give all children an educational test suited to the grade which they are supposed to have attained, and some central authority—most reasonably the State department of education—should determine the character of test to be given.

The need for greater centralization is further shown by the lack of cooperation between the various agencies which at present are charged with the duty of enforcing the law. No systematic plan of reporting between the department of labor and the school authorities exists anywhere in the State. When an inspector orders an employer to discharge a child or orders a child who is working illegally to return to school, he has no way of knowing whether or not the child actually returns. The inspector's authority ends with seeing that the employer discharges the child. In other words, the department of labor has authority only over the employment of children. In New York City for a few years the department of labor regularly reported to the compulsory-education department the names of children found working illegally; but many of them proved to be working only on Saturdays or after school hours, and as the department of labor did not know whether or not children reported were followed up and returned to school the plan was finally dropped. At the time of this investigation, when a child found illegally employed by an inspector anywhere in the State was discharged, he was allowed—because of this lack, in the laws themselves or in their administration, of provision for following him up—to slip from under the protection of any law. Greater cooperation among the various agencies could remove many of the present evils, but such cooperation is difficult both to arrange and to maintain in effect. The only remedy, therefore, for the evils of the present system seems to be centralization of authority over the administration of child-labor laws in some State agency which can supervise the work of all the local agencies concerned and can itself be held rigidly to account for its responsibilities toward the children of the State.

Even with thorough enforcement, however, such a law as that of New York, under which children who are at work on certificates are released from all supervision except the infrequent visits of inspectors, does not offer adequate protection to young wage earners in the first years of their working lives.

## APPENDIX.

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### APPLICATION OF LAWS.

The child-labor laws of New York State are complex and verbose. Many sections overlap each other in content. Sometimes this overlapping involves merely useless repetition, but sometimes it involves real or apparent contradiction. Five long sections are repeated, practically word for word, applying in one case to employment in factories and in the other case to employment in mercantile and other establishments in cities having 3,000 or more inhabitants.<sup>1</sup> The provisions in regard to the powers and duties of inspectors in relation to child labor are scattered through at least six different sections.<sup>2</sup> The labor law says that school records shall be "signed by the principal or chief executive officer of the school which such child has attended,"<sup>3</sup> while the education law, which takes precedence merely because more recently amended, says that they shall be signed—

"a In a city of the first class by the principal or chief executive of a school.

"b In all other cities and in school districts having a population of 5,000 or more and employing a superintendent of schools, by the superintendent of schools only.

"c In all other school districts by the principal teacher of the school."<sup>4</sup>

The greatest degree of complexity, however, appears only when an attempt is made to discover the exact application of the minimum-age and employment-certificate provisions—the corner stone upon which rests the entire structure of child-labor legislation.

No single minimum-age or employment-certificate law applies to all places of employment in all localities and at all times. Instead, five sections of the labor and compulsory education laws apply to different industries, or to places of different sizes, or only to the time when schools are in session. The accompanying chart shows the exact application of each of these sections.

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<sup>1</sup> Labor Law, secs. 71, 72, 73, 75, 76, and secs. 162, 163, 164, 165, 166, and 167. For the text of these sections see pp. 120-122, 124.

<sup>2</sup> Labor Law, secs. 43, 56, 59, 76, 167, and 172. For the text of these sections see pp. 116, 118, 119, 122, 124.

<sup>3</sup> Labor Law, secs. 73 and 165. For the text of these sections see pp. 122, 124.

<sup>4</sup> Education Law, sec. 630, subsec. 2. For the text of this section see p. 128.

The minimum age of 14 applies to employment, first, in any place in the State in factories at any time;<sup>1</sup> second, in cities and villages having a population of 3,000 or more in mercantile establishments, business offices, telegraph offices, restaurants, hotels, apartment houses, theaters and other places of amusement, bowling alleys, barber shops, and shoe-polishing establishments, in the distribution or transmission of merchandise, articles, or messages, and in the distribution or sale of articles at any time;<sup>2</sup> and third, anywhere in the State "in any business or service whatever" during "any part of the term during which the public schools of the district or city in which the child resides are in session."<sup>3</sup> But the section of the law which prohibits employment under 14 in factories specifically provides that "nothing herein contained shall prevent a person engaged in farming from permitting his children to do farm work for him upon his farm;" and also that "boys over the age of 12 years may be employed in gathering produce, for not more than six hours in any one day, subject to the requirements" of the education law.<sup>4</sup> The employer is responsible for violation of any minimum-age requirement.

Employment certificates are required of children from 14 to 16 years of age for employment, first, in any place in the State in factories,<sup>5</sup> mercantile establishments, business or telegraph offices, restaurants, hotels, and apartment houses, and in the distribution or transmission of merchandise or messages;<sup>6</sup> second, in first and second class cities in any occupation;<sup>7</sup> and third, in cities and villages having a population of 3,000 or more in theaters and other places of amusement, bowling alleys, barber shops, and shoe-polishing establishments, in the distribution of articles other than merchandise and messages, and in the sale of articles.<sup>8</sup> In addition, school-record certificates are required for employment of children 14 to 16 years of age in any occupation and in any place where employment certificates are not required,<sup>9</sup> i. e., in places of less than 3,000 inhabitants in theaters and other places of amusement, bowling alleys, barber shops, shoe-polishing establishments, in the distribution or transmission of articles other than merchandise or messages, and in the distribution or sale of articles; and anywhere outside of first and second class cities in any occupation whatever not specifically mentioned, except that in places of over 5,000 inhabitants children must hold employment certificates in order to be exempt from school attendance. It is to be noted particularly that children employed by peddlers or in places of amusement in the smaller cities are not required to hold employment but only school-record certificates. The principal significance of this lies in the fact that amusement resorts,

<sup>1</sup> Labor Law, sec. 70. For the text of this section see p. 120.

<sup>2</sup> Labor Law, sec. 162. For the text of this section see p. 124.

<sup>3</sup> Education Law, sec. 626, subsec. 1. For the text of this section see p. 126. In order to receive their full apportionment of public moneys all schools must be in session at least 180 days. Education Law, sec. 492 as amended by Acts of 1913, ch. 511.

<sup>4</sup> Labor Law, sec. 70. For the text of this section see p. 120.

<sup>5</sup> Labor Law, sec. 70; Education Law, sec. 626, subsecs. 2 and 3. For the text of these sections see pp. 120, 126.

<sup>6</sup> Education Law, sec. 626, subsecs. 2 and 3. For the text of this section see p. 126.

<sup>7</sup> Education Law, sec. 626, subsec. 3. For the text of this section see p. 126. Cities of the first class have a population of 175,000 or more; cities of the second class, a population of between 50,000 and 175,000; cities of the third class, a population of less than 50,000; villages may vary widely in population; towns are municipal corporations comprising the inhabitants within their boundaries. The village is a part of the town but the city is not. Towns have no stipulated population in New York State.

<sup>8</sup> Labor Law, sec. 162. For the text of this section see p. 124.

<sup>9</sup> Education Law, sec. 626, subsec. 2. For the text of this section see p. 126.

# ANALYSIS OF A

Places of employment

## (1) Factories

- (2) Mercantile establishments  
Business offices  
Telegraph offices  
Restaurants  
Hotels  
Apartment houses  
Distribution or transmission of  
messages

- (3) Theaters or other places of  
amusement  
Bowling alleys  
Barber shops  
Shoe-polishing establishments  
Distribution or transmission of  
merchandise or messages  
Distribution or sale of articles

## (4) Other occupations

<sup>1</sup> The compulsory education law of the superintendent of schools" and assumed that every city or school





including dance halls, skating rinks, etc., are frequently situated in small suburbs of large cities. The occupations not mentioned would include, of course, domestic work—for example, nurse maid; farm work, such as picking fruit; and other miscellaneous occupations. Though the majority of employers and of children are covered by the employment-certificate provisions there appear to be many for whom only school-record certificates are required.

The first thing discovered in examining the various sections of the law is that the minimum age for employment and the ages when either employment or school-record certificates are required do not exactly dovetail because they do not apply to exactly the same places of employment. For a child under 16 to stay out of school anywhere for any purpose he must have some form of certificate.<sup>1</sup> For employment out of school hours or during school vacations, however, three out of the five sections relating to employment certificates, each of which has a different application, provide only for issuing certificates to children from 14 to 16 years of age and therefore make no provision for children under 14 who, nevertheless, may be employed in certain places during school vacations. The section of the labor law relating to factories, for example, specifically permits boys over 12 to be employed in gathering produce. If between 14 and 16 years of age such a boy apparently might be required to have an employment certificate<sup>2</sup> whether working during vacation or during the term that schools were in session; but if between 12 and 14—the very period when it is most important to prove that he is actually of an age to be legally employed—nothing in the law appears to prevent his working during vacations without any documentary evidence of the legality of his employment.<sup>3</sup> Moreover, no minimum age is fixed and no form of employment certificate is required during school vacations for children under 14 for any occupation or in any place not specifically mentioned in the labor law—i. e., (1) employment anywhere in the State in factories<sup>4</sup> and (2) employment in cities of over 3,000 inhabitants in mercantile establishments, business offices, telegraph offices, restaurants, hotels, apartment houses, theaters or other places of amusement, bowling alleys, barber shops, shoe-polishing establishments, or in the distribution or transmission of merchandise, articles, or messages, or in the distribution or sale of articles.<sup>5</sup> In the former case the child who can gather produce during vacation without a certificate from the time he is 12 until he is 14, apparently may have to obtain a certificate, even for vacation work, as soon as he becomes 14. In the latter case, too, the child who from the time he is physically capable of any useful labor until he is 14 can be legally employed without a

<sup>1</sup> Education Law, sec. 624. For the text of this section see p. 126.

<sup>2</sup> Labor Law, sec. 70. For the text of this section see p. 120.

<sup>3</sup> Such a case is not covered (1) by Labor Law, sec. 70, because this section requires certificates only for children "between the ages of 14 and 16"; (2) by Labor Law, sec. 162, because this type of employment is not mentioned as covered by this section, and even if it could by any stretch be considered to be covered, this section applies only to cities and villages having a population of over 3,000; (3) by Education Law, sec. 626, because this section requires certificates only for children "between 14 and 16 years of age"; (4) by Education Law, sec. 624, because this section applies only to school attendance, and therefore does not cover vacation employment; or (5) by Education Law, sec. 621, for both of the two last-given reasons. A child under 14 is not exempted from school attendance, even for employment, and Education Law, sec. 626, subsec. 1, makes it illegal to employ a child "in any business or service whatever, for any part of the term during which the public schools of the district or city in which the child resides are in session." This appears to make it illegal to employ any child under 14 after school hours while school is in session, and therefore restricts their employment to school vacations.

<sup>4</sup> Labor Law, sec. 70. For the text of this section see p. 120.

<sup>5</sup> Labor Law, sec. 162. For the text of this section see p. 124.

certificate during the long school vacations—in some nonfactory occupations anywhere and in any nonfactory occupation in a community which has less than 3,000 inhabitants—apparently has to obtain some kind of a certificate for such work after he becomes 14 years of age.<sup>1</sup>

An analysis<sup>2</sup> of the exact application of the sections of the labor and education laws<sup>3</sup> which require certificates for employment or for exemption from school attendance of children from 14 to 16 years of age increases rather than decreases the complexity. To discover for what occupations, in what localities, and at what times such a child must have either an employment certificate or a school-record certificate requires the careful consideration of four different places of employment or groups of such places,<sup>4</sup> four classes of localities,<sup>5</sup> and two elements of time.<sup>6</sup> These provisions are contained in five separate sections of two distinct laws.

Of these five sections only two apply to the same places of employment and the same localities at the same times, and even these two differ somewhat in their requirements.<sup>7</sup> One section of the labor law<sup>8</sup> applies only to factories, but to factories anywhere in the State. The other section of the labor law applies to mercantile establishments and to a list of other places<sup>9</sup>—some but not by any means all of which are covered by one section of the education law. In other words, the places of employment mentioned in the section of the labor law referring to mercantile establishments must be divided into two groups, one of which is covered by requirements similar to those of the labor law relating to factories and the other by entirely different requirements in the education law. Moreover, the occupations not mentioned at all in the labor law constitute a fourth group covered only by the education law.<sup>10</sup> The section of the labor law relating to mercantile and other establishments<sup>11</sup> does not apply to cities and villages of less than 3,000 population; two sections of the education law<sup>12</sup> create differences between cities and

<sup>1</sup> Doubt is thrown upon this interpretation, however, by the fact that the first part of sec. 626 of the education law, the only one relating to employment and not merely to school attendance, prohibits the employment of a child under 14 "in any business or service whatever" only during "any part of the term during which the public schools of the district or city in which the child resides are in session." Though in the subsections relating to certificates no mention is made of this limitation to school terms, it might be argued that this first provision limited the application of the entire section.

<sup>2</sup> The results of such an analysis are presented in tabular form on the chart facing p. 112.

<sup>3</sup> Labor Law, secs. 70 and 162; Education Law, secs. 621, 624, and 626. For the text of these sections see pp. 120, 124, 125, 126.

<sup>4</sup> (1) Factories; (2) mercantile establishments, business offices, telegraph offices, restaurants, hotels, apartment houses, distribution or transmission of merchandise or messages; (3) theaters or other places of amusement, bowling alleys, barber shops, shoe-polishing establishments, distribution or transmission of articles other than merchandise or messages, distribution or sale of articles; and (4) other occupations.

<sup>5</sup> (1) Cities of the first and second classes; and (2) cities or school districts having over 5,000. (3) from 3,000 to 5,000, and (4) under 3,000 inhabitants.

<sup>6</sup> Employment (1) during school hours and (2) outside of school hours.

<sup>7</sup> Education Law, secs. 621 and 624. For the text of these sections see pp. 125, 126. The first of these sections provides that every child must attend school, and the second that every person in parental relation to a child must send the child to school. These two sections both distinguish between (1) children residing in cities or school districts having a population of 5,000 or more and employing a superintendent of schools, and (2) children residing elsewhere. For the first class of children the provisions of the two sections are practically the same, that children from 14 to 16 years of age must attend school unless they have employment certificates and are regularly employed. They are worded differently, however. For the second class of children—those living in cities or school districts having less than 5,000 inhabitants—the first section provides for exemption from school attendance if "regularly and lawfully engaged in any useful employment or service," and the second requires for such exemption either an employment certificate and regular employment in a factory or mercantile establishment, business or telegraph office, restaurant, hotel, apartment house, or in the distribution or transmission of merchandise or messages; or else a school-record certificate and regular employment in some other occupation or place.

<sup>8</sup> Labor Law, sec. 70. For the text of this section see p. 126.

<sup>9</sup> Labor Law, sec. 162. For the text of this section see p. 124.

<sup>10</sup> Education Law, secs. 621, 624, and 626. For the text of these sections see pp. 125, 126.

<sup>11</sup> Labor Law, sec. 162. For the text of this section see p. 124.

<sup>12</sup> Education Law, secs. 621 and 624. For the text of these sections see pp. 125, 126.

school districts of under 5,000 population and those of 5,000 and over; and the third section of the education law<sup>1</sup> establishes for cities of the first and second classes different requirements from those for the rest of the State. Finally, two sections of the education law<sup>2</sup> relate only to school attendance and therefore do not affect vacation employment or employment before or after school hours, while the third section of the education law and both sections of the labor law<sup>3</sup> relate to employment at any time.

Careful analysis makes the law finally comprehensible, as it brings out the fact that everywhere in the State a child between 14 and 16 must have either an employment or a school-record certificate, and that "regular employment" is required for exemption from school attendance—in other words, such a child must be either at school or at work while the schools are in session. This fact does not, however, obviate the practical disadvantages—especially from the point of view of enforcement—of laws so complicated that their exact application is difficult to determine. Nor are these disadvantages obviated by the fact that, if overlapping provisions apparently requiring both employment and school-record certificates are overlooked on the assumption that the latter can be ignored as themselves prerequisites to obtaining the former, it is possible after careful study to discover where and at what times employment certificates, and where and at what times only school-record certificates are necessary for the employment of children from 14 to 16 years of age.

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<sup>1</sup> Education Law, sec. 623. For the text of this section see p. 126.

<sup>2</sup> Education Law, secs. 621 and 624. For the text of these sections see pp. 125, 126.

<sup>3</sup> Labor Law, secs. 70, 162; Education Law, sec. 626. For the text of these sections see pp. 120, 124, 126.

## LAWS RELATING TO EMPLOYMENT CERTIFICATES.

In effect Jan. 1, 1916.

*Note.*—[The duties, authority, and powers relating to the enforcement of labor laws heretofore exercised by the commissioner of labor, the deputy commissioner of labor, and the industrial board, have been transferred by chapter 674 of the Acts of 1915 to the industrial commission. In every case the new enforcing authority has been indicated in the text by an insertion in brackets, the former enforcing powers being omitted.]

### REGULATED OCCUPATIONS.

#### DEFINITIONS.

*Terms used in labor laws.*—Employee. The term "employee," when used in this chapter, means a mechanic, workman or laborer who works for another for hire.

Employer. The term "employer," when used in this chapter, means the person employing any such mechanic, workman or laborer, whether the owner, proprietor, agent, superintendent, foreman or other subordinate.

Factory; work for a factory. The term factory, when used in this chapter, shall be construed to include any mill, workshop, or other manufacturing or business establishment and all buildings, sheds, structures or other places used for or in connection therewith, where one or more persons are employed at labor, except dry dock plants engaged in making repairs to ships, and except power houses, generating plants, barns, storage houses, sheds and other structures owned or operated by a public service corporation, other than construction or repair shops, subject to the jurisdiction of the public service commission under the public service commission law. Work shall be deemed to be done for a factory within the meaning of this chapter whenever it is done at any place, upon the work of a factory or upon any of the materials entering into the product of the factory, whether under contract or arrangement with any person in charge of or connected with such factory directly or indirectly through the instrumentality of one or more contractors or other third persons.

\* \* \* \* \*

Mercantile establishment. The term "mercantile establishment," when used in this chapter, means any place where goods, wares or merchandise are offered for sale.

Tenement house. The term "tenement house," when used in this chapter, means any house or building, or portion thereof, which is either rented, leased, let or hired out, to be occupied, or is occupied in whole or in part as the home or residence of three families or more living independently of each other, and doing their cooking upon the premises, and includes apartment houses, flat houses and all other houses so occupied, and for the purposes of this chapter shall be construed to include any building on the same lot with any such tenement house and which is used for any of the purposes specified in section one hundred of this chapter.

Whenever, in this chapter, authority is conferred upon the [industrial commission], it shall also be deemed to include [its] deputies or a deputy acting under [its] direction. [Consolidated Laws 1909 volume 3 Labor Chapter 31 article 1 section 2 as amended by 1913 Chapter 529, by 1914 Chapter 512, and by 1915 Chapter 650]

*Court decision.*—A factory is a structure or plant where something is made or manufactured from raw or partly wrought materials into forms suitable for use.—*Shannahan v. Empire Engineering Corporation*, 204 N. Y. 543 (1913).

*Opinion.*—Departments maintained in department stores, clothing stores, and millinery shops, in which articles are made are factories.—Attorney General (1913).

### ALL REGULATED OCCUPATIONS.

#### ENFORCEMENT.

*Industrial commission to be head of the department of labor.*—There shall be a department of labor, the head of which shall be the industrial commission. \* \* \* [C L 1909 v 3 Labor C 31 art 3 s 40 as amended by 1915 C 674]

*Powers of industrial commission; hindering commissioners or their deputies, etc., prohibited.*—1. The commissioners, deputy commissioners, secretary and other officers

and assistants of the commission may administer oaths and take affidavits in matters relating to the powers and duties of the commission.

2. No person shall interfere with, obstruct or hinder by force or otherwise the commissioners, deputy commissioners, or any officer, agent or employee of the department of labor while in the performance of their duties, or refuse to properly answer questions asked by such officers or employees pertaining to the provisions of this chapter, or refuse them admittance to any place which is affected by the provisions of this chapter. \* \* \* [C L 1909 v 3 Labor C 31 art 3 s 43 as amended by 1915 C 674]

*Powers of industrial commission; investigations, etc.*—The commission shall have power to make investigations concerning and report upon the conditions of labor generally and upon all matters relating to the enforcement and effect of the provisions of this chapter and of the rules and regulations of the commission. Each member of the commission and the secretary shall have power to administer oaths and take affidavits and to make personal inspections of all places to which this chapter applies. The commission shall have power to subpoena and require the attendance of witnesses and the production of books and papers pertinent to the investigations and inquiries hereby authorized, and to examine them in relation to any matter it has power to investigate, and to issue commissions for the examination of witnesses who are out of the State or unable to attend before the commission, or excused from attendance. [C L 1909 v 3 Labor C 31 art 3-a s 51 as added by 1913 C 145 and amended by 1915 C 674]

*Regulations of industrial commission.*—(1) The commission shall have power to make, amend and repeal rules and regulations for carrying into effect the provisions of this chapter, applying such provisions to specific conditions and prescribing means, methods and practices to effectuate such provisions.

\* \* \* \* \*

(5) The rules and regulations of the commission shall have the force and effect of law and shall be enforced in the same manner as the provisions of this chapter.

(6) No provision of this chapter specifically conferring power on the commission to make rules and regulations shall limit the power conferred by this section. [C L 1909 v 3 Labor C 31 art 3-a s 51-a as added by 1915 C 674]

*Opinion.*—The [industrial commission] may adopt rules and regulations for the safety of factories more stringent than corresponding provisions of the Labor Law.—Attorney General (1913).

*First deputy industrial commissioner to be inspector general; bureau of inspection; divisions.*—The bureau of inspection, subject to the supervision and direction of the [industrial commission], shall have charge of all inspections made pursuant to the provisions of this chapter, and shall perform such other duties as may be assigned to it by the [industrial commission]. The first deputy [industrial commissioner] shall be the inspector general of the State, and in charge of this bureau subject to the direction and supervision of the [industrial commission], except that the division of industrial hygiene shall be under the immediate direction and supervision of the [industrial commission]. Such bureau shall have four divisions as follows: Factory inspection, homework inspection, mercantile inspection and industrial hygiene. There shall be such other divisions in such bureau as the [industrial commission] may deem necessary. In addition to their respective duties as prescribed by the provisions of this chapter, such divisions shall perform such other duties as may be assigned to them by the [industrial commission]. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 53 as amended by 1913 C 145]

*Appointment of factory and mercantile inspectors.*—1. Factory inspectors. There shall not be less than one hundred and twenty-five factory inspectors, not more than thirty of whom shall be women. Such inspectors shall be appointed by the [industrial commission] and may be removed by [it] at any time. The inspectors shall be divided into seven grades. Inspectors of the first grade, of whom there shall not be more than ninety-five, shall each receive an annual salary of one thousand two hundred dollars; inspectors of the second grade, of whom there shall be not more than fifty, shall each receive an annual salary of one thousand five hundred dollars; inspectors of the third grade, of whom there shall be not more than twenty-five, shall each receive an annual salary of one thousand eight hundred dollars; inspectors of the fourth grade, of whom there shall be not more than ten, shall each receive an annual salary of two thousand dollars and shall be attached to the division of industrial hygiene and act as investigators in such division; inspectors of the fifth grade, of whom there shall be not more than nine, one of whom shall be able to speak and write at least five European languages in addition to English, shall each receive an annual salary of two thousand five hundred dollars and shall act as supervising inspectors; inspectors of the sixth grade, of whom there shall be not less than three and one of whom shall be a woman, shall act as medical inspectors and shall each receive an annual salary of two thousand

five hundred dollars; inspectors of the seventh grade, of whom there shall be not less than four, shall each receive an annual salary of three thousand five hundred dollars; all of the inspectors of the sixth grade shall be physicians duly licensed to practice medicine in the State of New York. Of the inspectors of the seventh grade one shall be a physician duly licensed to practice medicine in the State of New York, and he shall be the chief medical inspector; one shall be a chemical engineer; one shall be a mechanical engineer, and an expert in ventilation and accident prevention; and one shall be a civil engineer, and an expert in fire prevention and building construction.

2. Mercantile inspectors. The [industrial commission] may appoint from time to time not more than twenty mercantile inspectors not less than four of whom shall be women and who may be removed by [it] at any time. The mercantile inspectors may be divided into three grades but not more than five shall be of the third grade. Each mercantile inspector of the first grade shall receive an annual salary of one thousand dollars; of the second grade an annual salary of one thousand two hundred dollars; and of the third grade an annual salary of one thousand five hundred dollars. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 54 as amended by 1913 C 145]

*Factory-inspection districts; appointment of chief factory inspectors, etc.*—For the inspection of factories, there shall be two inspection districts to be known as the first factory inspection district and the second factory inspection district. The first factory inspection district shall include the counties of New York, Bronx, Kings, Queens, Richmond, Nassau and Suffolk. The second factory inspection district shall include all the other counties of the State. There shall be two chief factory inspectors who shall be appointed by the [industrial commission] and who may be removed by [it] at any time and each of whom shall receive a salary of four thousand dollars a year. The inspection of factories in each factory inspection district shall, subject to the supervision and direction of the [industrial commission], be in charge of a chief factory inspector assigned to such district by the [industrial commission]. The [industrial commission] may designate one of the supervising inspectors as assistant chief factory inspector for the first district, and while acting as such assistant chief factory inspector he shall receive an additional salary of five hundred dollars per annum. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 55 as added by 1913 C 145]

*Duties and powers of industrial commission, factory inspectors, etc.*—1. The [industrial commission] shall, from time to time, divide the State into sub-districts, assign one factory inspector of the fifth grade to each sub-district as supervising inspector, and may in [its] discretion transfer such supervising inspector from one sub-district to another; [it] shall from time to time, assign and transfer factory inspectors to each factory inspection district and to any of the divisions of the bureau of inspection; [it] may assign any factory inspector to inspect any special class or classes of factories or to enforce any special provisions of this chapter; and [it] may assign any one or more of them to act as clerks in any office of the department.

2. The [industrial commission] may authorize any deputy [industrial commissioner] or assistant and any agent or inspector in the department of labor to act as a factory inspector with the full power and authority thereof.

3. The [industrial commission], the first deputy [industrial commissioner] and his assistant or assistants, and every factory inspector and every person duly authorized pursuant to sub-division two of this section may, in the discharge of [its or] his duties enter any place, building or room which is affected by the provisions of this chapter and may enter any factory whenever [it or] he may have reasonable cause to believe that any labor is being performed therein.

4. The [industrial commission] shall visit and inspect or cause to be visited and inspected the factories, during reasonable hours, as often as practicable, and shall cause the provisions of this chapter and the rules and regulations of the [industrial commission] to be enforced therein.

5. Any lawful municipal ordinance,<sup>1</sup> by-law or regulation relating to factories, in addition to the provisions of this chapter and not in conflict therewith, may be observed and enforced by the [industrial commission]. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 56 as amended by 1913 C 145]

*Duties of division of homework inspection.*—The division of homework inspection shall be in charge of an officer or employee of the department of labor designated by the [industrial commission] and shall, subject to the supervision and direction of the [industrial commission], have charge of all inspections of tenement houses and of labor therein and of all work done for factories at places other than such factories. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 57 as added by 1913 C 145]

<sup>1</sup> With the possible exception of New York City ordinances (*City of New York v. Trustees of Sailors' Snug Harbor*, 85 App. Div. 355, aff'd 180 N. Y. 537, and opinion by Attorney General, Jan. 16, 1904).

*Appointment of chief mercantile inspector.*—The division of mercantile inspection shall be under the immediate charge of the chief mercantile inspector, but subject to the direction and supervision of the [industrial commission]. The chief mercantile inspector shall be appointed and be at pleasure removed by the [industrial commission], and shall receive an annual salary not to exceed four thousand dollars. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 58 as amended by 1914 C 333]

*Mercantile inspection districts; duties and powers of industrial commission, mercantile inspectors, etc.*—1. The [industrial commission] may divide the cities of the first and second class of the State into mercantile inspection districts, assign one or more mercantile inspectors to each such district, and may in his discretion transfer them from one such district to another; he may assign any of them to inspect any special class or classes of mercantile or other establishments specified in article twelve of this chapter, situated in cities of the first and second class, or to enforce in cities of the first or second class any special provision of such article.

2. The [industrial commission] may authorize any deputy [industrial commissioner] or assistant and any agent or inspector in the department of labor to act as a mercantile inspector with the full power and authority thereof.

3. The [industrial commission], the chief mercantile inspector and his assistant or assistants and every mercantile inspector or acting mercantile inspector may in the discharge of [its or] his duties enter any place, building or room in cities of the first or second class which is affected by the provisions of article twelve of this chapter, and may enter any mercantile or other establishment specified in said article, situated in the cities of the first or second class, whenever [it or] he may have reasonable cause to believe that it is affected by the provisions of article twelve of this chapter.

4. The [industrial commission] shall visit and inspect or cause to be visited and inspected the mercantile and other establishments specified in article twelve of this chapter situated in cities of the first and second class, as often as practicable, and shall cause the provisions of said article and the rules and regulations of the [industrial commission] to be enforced therein.

5. Any lawful municipal ordinance, by-law or regulation relating to mercantile or other establishments specified in article twelve of this chapter, in addition to the provisions of this chapter and not in conflict therewith, may be enforced by the [industrial commission] in cities of the first and second class. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 59 as amended by 1913 C 145]

*Duties and powers of division of industrial hygiene.*—The inspectors of the seventh grade shall constitute the division of industrial hygiene, which shall be under the immediate charge of the [industrial commission]. The [industrial commission] may select one of the inspectors of the seventh grade to act as the director of such division, and such director while acting in that capacity shall receive an additional compensation of five hundred dollars a year. The members of the division of industrial hygiene shall make special inspections of factories, mercantile establishments and other places subject to the provisions of this chapter, throughout the State, and shall conduct special investigations of industrial processes and conditions. The commissioner of labor [industrial commission] shall submit to the industrial board [industrial commission] the recommendations of the division regarding proposed rules and regulations and standards to be adopted to carry into effect the provisions of this chapter and shall advise said board [commission] concerning the operation of such rules and standards and as to any changes or modifications to be made therein. The members of such division shall prepare material for leaflets and bulletins calling attention to dangers in particular industries and the precautions to be taken to avoid them; and shall perform such other duties and render such other services as may be required by the [industrial commission]. The director of such division shall make an annual report to the [industrial commission] of the operation of the division, to which may be attached the individual reports of each member of the division as above specified, and same shall be transmitted to the legislature as part of the annual report of the [industrial commission]. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 60 as added by 1913 C 145]

*Duties and powers of medical inspectors.*—The inspectors of the sixth grade shall constitute the section of medical inspection which shall, subject to the supervision and direction of the director of the division of industrial hygiene, be under the immediate charge of the chief medical inspector. The section of medical inspection shall inspect factories, mercantile establishments and other places subject to the provisions of this chapter throughout the State with respect to conditions of work affecting the health of persons employed therein and shall have charge of the physical examination and medical supervision of all children employed therein and shall perform such other duties and render such other services as the [industrial commission] may direct. [C L 1909 v 3 Labor C 31 art 4 (as renumbered by 1913 C 145) s 61 as added by 1913 C 145]

*Powers of industrial commission; information to be furnished upon request; hindering commissioners or their deputies, etc., prohibited; penalty.*—The owner, operator, manager or lessee of any mine, factory, workshop, warehouse, elevator, foundry, machine shop or other manufacturing establishment, or any agent, superintendent, subordinate, or employee thereof, and any person employing or directing any labor affected by the provisions of this chapter, shall, when requested by the [industrial commission], furnish any information in his possession or under his control which [said commission] is authorized to require, and shall admit [it] or [its] duly authorized representative to any place which is affected by the provisions of this chapter for the purpose of inspection. A person refusing to admit such [industrial commission], or person authorized by [it], to any such establishment, or to furnish [it] any information requested, or who refuses to answer or untruthfully answers questions put to him by such [industrial commission], in a circular or otherwise, shall forfeit to the people of the State the sum of one hundred dollars for each refusal or untruthful answer given, to be sued for and recovered by the [industrial commission] in [its] name of office. The amount so recovered shall be paid into the State treasury. [C L 1909 v 3 Labor C 31 art 5 (as renumbered by 1913 C 145) s 64 as amended by 1913 C 145]

*Factories to be registered with State department of labor.*—The owner of every factory shall register such factory with the State department of labor, giving the name of the owner, his home address, the address of the business, the name under which it is carried on, the number of employees and such other data as the [industrial commission] may require. Such registration of existing factories shall be made within six months after this section takes effect. Factories hereafter established shall be so registered within thirty days after the commencement of business. Within thirty days after a change in the location of a factory the owner thereof shall file with the [industrial commission] the new address of the business, together with such other information as the [industrial commission] may require. [C L 1909 v 3 Labor C 31 art 6 s 69 as added by 1912 C 335]

## FACTORIES.

### MINIMUM AGE AND EMPLOYMENT CERTIFICATES.

*Employment under 14 prohibited; certificates required from 14 to 16; farm work excepted under certain conditions.*—No child under the age of fourteen years shall be employed, permitted or suffered to work in or in connection with any factory in this State, or for any factory at any place in this State. No child between the ages of fourteen and sixteen years shall be so employed, permitted or suffered to work unless an employment certificate, issued as provided in this article, shall have been theretofore filed in the office of the employer at the place of employment of such child. Nothing herein contained shall prevent a person engaged in farming from permitting his children to do farm work for him upon his farm. Boys over the age of twelve years may be employed in gathering produce, for not more than six hours in any one day, subject to the requirements of chapter twenty-one of the laws of nineteen hundred and nine, entitled "An act relating to education, constituting chapter sixteen of the Consolidated Laws," and all acts amendatory thereof. [C L 1909 v 3 Labor C 31 art 6 s 70 as amended by 1913 C 529]

*Court decisions.*—Under a former section, of which this is an amendment, the following decisions were rendered: Violation is a misdemeanor and prima facie evidence of negligence on the part of the employer; and a child employed in violation of the statute does not assume the risk of such employment and can not be held guilty of contributory negligence.—*Marino v. Lehmaier*, 173 N. Y. 530, 66 N. E. 572 (1901); *Sitts v. Walontha Co.*, 94 App. Div. 38 (1904); *Lee v. Sterling Silk Mfg. Co.*, 115 App. Div. 589, 93 N. Y. 8. 560 (1906); *Fortune v. Hall*, 122 App. Div. 250 (1906); *Kenyon v. Sanford Mfg. Co.*, 119 App. Div. 570 (1907); *Danaher v. American Mfg. Co.*, 126 App. Div. 385 (1908); *Koester v. Rochester Candy Works*, 194 N. Y. 92 (1909). The age is no defense.—*City of New York v. Chelsea Jute Co.*, 138 N. Y. 642, 152 App. Div. 775 (1912). But an officer of a corporation who has directed that no child shall be employed contrary to law is not liable if a subordinate, without his knowledge, illegally employs a child.—*People v. Taylor*, 192 N. Y. 398 (1908). Where a girl, 15 years old, without an employment certificate, was injured by defects in machinery, the master was liable.—*Crowley v. American Druggist Syndicate*, 138 N. Y. 642, 152 App. Div. 775 (1912).

*Opinion.*—A child under 14 years of age may not be employed in a factory or mercantile establishment which is owned or controlled by the child's parents.—*Attorney General* (1912).

### EMPLOYMENT CERTIFICATES AND RECORDS.

*Commissioner of health to issue certificates; age, school, and health records required; method of issuing.*—Such certificate shall be issued by the commissioner of health or the executive officer of the board or department of health of the city, town or village where such child resides, or is to be employed, or by such other officer thereof as may be designated by such board, department or commissioner for that purpose, upon the



application of the parent or guardian or custodian of the child desiring such employment. Such officer shall not issue such certificate until he has received, examined, approved and filed the following papers duly executed, viz: The school record of such child properly filled out and signed as provided in this article; also, evidence of age showing that the child is fourteen years old or upwards, which shall consist of the evidence thereof provided in one of the following subdivisions of this section and which shall be required in the order herein designated as follows:

(a) Birth certificate: A duly attested transcript of the birth certificate filed according to law with a registrar of vital statistics or other officer charged with the duty of recording births, which certificate shall be conclusive evidence of the age of such child.

(b) Certificate of graduation: A certificate of graduation duly issued to such child showing that such child is a graduate of a public school of the State of New York or elsewhere, having a course of not less than eight years, or of a school in the State of New York other than a public school, having a substantially equivalent course of study of not less than eight years' duration, in which a record of the attendance of such child has been kept as required by article \* \* \* [23] of the education law: *Provided*, That the record of such school shows such child to be at least fourteen years of age.

(c) Passport or baptismal certificate: A passport or a duly attested transcript of a certificate of baptism showing the date of birth and place of baptism of such child.

(d) Other documentary evidence: In case it shall appear to the satisfaction of the officer to whom application is made, as herein provided, for an employment certificate, that a child for whom such certificate is requested, and who has presented the school record, is in fact over fourteen years of age, and that satisfactory documentary evidence of age can be produced, which does not fall within any of the provisions of the preceding subdivisions of this section, and that none of the papers mentioned in said subdivisions can be produced, then and not otherwise he shall present to the board of health of which he is an officer or agent, for its action thereon, a statement signed by him showing such facts, together with such affidavits or papers as may have been produced before him constituting such evidence of the age of such child, and the board of health, at a regular meeting thereof, may then, by resolution, provide that such evidence of age shall be fully entered on the minutes of such board, and shall be received as sufficient evidence of the age of such child for the purpose of this section.

(e) Physicians' certificates: In cities of the first class only, in case application for the issuance of an employment certificate shall be made to such officer by a child's parent, guardian, or custodian who alleges his inability to produce any of the evidence of age specified in the preceding subdivisions of this section, and if the child is apparently at least fourteen years of age, such officer may receive and file an application signed by the parent, guardian or custodian of such child for physicians' certificates. Such application shall contain the alleged age, place and date of birth, and present residence of such child, together with such further facts as may be of assistance in determining the age of such child. Such application shall be filed for not less than ninety days after date of such application for such physicians' certificates, for an examination to be made of the statements contained therein, and in case no facts appear within such period or by such examination tending to discredit or contradict any material statement of such application, then and not otherwise the officer may direct such child to appear thereafter for physical examination before two physicians officially designated by the board of health, and in case such physicians shall certify in writing that they have separately examined such child and that in their opinion such child is at least fourteen years of age such officer shall accept such certificates as sufficient proof of the age of such child for the purposes of this section. In case the opinions of such physicians do not concur, the child shall be examined by a third physician and the concurring opinions shall be conclusive for the purpose of this section as to the age of the child.

Such officer shall require the evidence of age specified in subdivision (a) in preference to that specified in any subsequent subdivision and shall not accept the evidence of age permitted by any subsequent subdivision unless he shall receive and file in addition thereto an affidavit of the parent showing that no evidence of age specified in any preceding subdivision or subdivisions of this section can be produced. Such affidavit shall contain the age, place and date of birth, and present residence of such child, which affidavit must be taken before the officer issuing the employment certificate, who is hereby authorized and required to administer such oath and who shall not demand or receive a fee therefor. Such employment certificate shall not be issued until such child further has personally appeared before and been examined by the officer issuing the certificate, and until such officer shall, after making such examination, sign and file in his office a statement that the child can read and legibly write

simple sentences in the English language and that in his opinion the child is fourteen years of age or upwards and has reached the normal development of a child of its age, and is in sound health and is physically able to perform the work which it intends to do. Every such employment certificate shall be signed, in the presence of the officer issuing the same, by the child in whose name it is issued. In every case, before an employment certificate is issued, such physical fitness shall be determined by a medical officer of the department or board of health, who shall make a thorough physical examination of the child and record the result thereof on a blank to be furnished for the purpose by the State [industrial commission] and shall set forth thereon such facts concerning the physical condition and history of the child as the [industrial commission] may require. [C L 1909 v 3 Labor C 31 art 6 s 71 as amended by 1912 C 333]

*Court decision.*—Employment of a child between 14 and 16 in violation of the two preceding sections is negligence. The child can not be guilty of contributory negligence or assume the risks of employment.—*Dragotto v. Plunkett*, 99 N. Y. 361, 113 App. Div. 648 (1906).

*Opinion.*—The requirement of an examination as to physical fitness is of State-wide application and is not limited to cities of the first class. Attorney General (1912).

*Contents of certificate.*—Such certificate shall state the date and place of birth of the child, and describe the color of the hair and eyes, the height and weight and any distinguishing facial marks of such child, and that the papers required by the preceding section have been duly examined, approved and filed and that the child named in such certificate has appeared before the officer signing the certificate and been examined. [C L 1909 v 3 Labor C 31 art 6 s 72]

*Contents of school record; educational requirements.*—The school record required by this article shall be signed by the principal or chief executive officer of the school which such child has attended and shall be furnished, on demand, to a child entitled thereto or to the board, department or commissioner of health. It shall contain a statement certifying that the child has regularly attended the public schools or schools equivalent thereto, or parochial schools, for not less than one hundred and thirty days during the twelve months next preceding his fourteenth birthday, or during the twelve months next preceding his application for such school record and is able to read and write simple sentences in the English language, and has received during such period instruction in reading, spelling, writing, English grammar and geography and is familiar with the fundamental operations of arithmetic up to and including fractions and has completed the work prescribed for the first six years of the public elementary school or school equivalent thereto or parochial school from which such school record is issued. Such school record shall also give the date of birth and residence of the child as shown on the records of the school and the name of its parent or guardian or custodian. [C L 1909 v 3 Labor C 31 art 6 s 73 as amended by 1913 C 144]

*Enforcement: duties and powers of industrial commission; list of certificates to be sent to industrial commission; blank certificates, etc.*—The board or department of health or health commissioner of a city, village or town, shall transmit, between the first and tenth day of each month, to the [industrial commission], a list of the names of all children to whom certificates have been issued during the preceding month together with a duplicate of the record of every examination as to the physical fitness, including examinations resulting in rejection. In cities of the first and second class all employment certificates and school records required under the provisions of this chapter shall be in such form as shall be approved by the [industrial commission]. In towns, villages or cities other than cities of the first or second class, the [industrial commission] shall prepare and furnish blank forms for such employment certificates and school records. No school record or employment certificate required by this article, other than those approved or furnished by the [industrial commission] as above provided, shall be used. The [industrial commission] shall inquire into the administration and enforcement of the provisions of this article by all public officers charged with the duty of issuing employment certificates, and for that purpose the [industrial commission] shall have access to all papers and records required to be kept by all such officers. [C L 1909 v 3 Labor C 31 art 6 s 75 as amended by 1913 C 144]

*Lists required under 16; certificates to be returned to child or parent; evidence of age may be required for child apparently under 16; false statement a misdemeanor; evidence of illegal employment.*—Each person owning or operating a factory and employing children therein shall keep, or cause to be kept in the office of such factory, a register, in which shall be recorded the name, birthplace, age and place of residence of all children so employed under the age of sixteen years. Such register and the certificate filed in such office shall be produced for inspection upon the demand of the [industrial commission]. On termination of the employment of a child so registered, and whose certifi-

cate is so filed, such certificate shall be forthwith surrendered by the employer to the child or its parent or guardian or custodian. The [industrial commission] may make demand on any employer in whose factory a child apparently under the age of sixteen years is employed or permitted or suffered to work, and whose employment certificate is not then filed as required by this article, that such employer shall either furnish [it] within ten days, evidence satisfactory to [it] that such child is in fact over sixteen years of age, or shall cease to employ or permit or suffer such child to work in such factory. The [industrial commission] may require from such employer the same evidence of age of such child as is required on the issuance of an employment certificate; and the employer furnishing such evidence shall not be required to furnish any further evidence of the age of the child. A notice embodying such demand may be served on such employer personally or may be sent by mail addressed to him at said factory, and if served by post shall be deemed to have been served at the time when the letter containing the same would be delivered in the ordinary course of the post. When the employer is a corporation such notice may be served either personally upon an officer of such corporation, or by sending it by post addressed to the office or the principal place of business of such corporation. The papers constituting such evidence of age furnished by the employer in response to such demand shall be filed with the [industrial commission] and a material false statement made in any such paper or affidavit by any person, shall be a misdemeanor.<sup>1</sup> In case such employer shall fail to produce and deliver to the [industrial commission] within ten days after such demand such evidence of age herein required by [it], and shall thereafter continue to employ such child or permit or suffer such child to work in such factory, proof of the giving of such notice and of such failure to produce and file such evidence shall be prima facie evidence in any prosecution brought for a violation of this article that such child is under sixteen years of age and is unlawfully employed. [C L 1909 v 3 Labor C 31 art 6 s 76]

*Certificates of physical fitness may be required from 14 to 16; revocation of employment certificates.*—1. All children between fourteen and sixteen years of age employed in factories shall submit to a physical examination whenever required by a medical inspector of the State department of labor. The result of all such physical examinations shall be recorded on blanks furnished for that purpose by the [industrial commission], and shall be kept on file in such office or offices of the department as the [industrial commission] may designate.

2. If any such child shall fail to submit to such physical examination, the [industrial commission] may issue an order canceling such child's employment certificate. Such order shall be served upon the employer of such child who shall forthwith deliver to an authorized representative of the department of labor the child's employment certificate. A certified copy of the order of cancellation shall be served on the board of health or other local authority that issued the said certificate. No such child whose employment certificate has been canceled, as aforesaid, shall, while said cancellation remains unrevoked, be permitted or suffered to work in any factory of the State before it attains the age of sixteen years. If thereafter such child shall submit to the physical examination required, the [industrial commission] may issue an order revoking the cancellation of the employment certificate and may return the employment certificate to such child. Copies of the order of revocation shall be served upon the former employer of the child and the local board of health as aforesaid.

3. If as a result of the physical examination made by a medical inspector it appears that the child is physically unfit to be employed in a factory, such medical inspector shall forthwith submit a report to that effect to the [industrial commission] which shall be kept on file in the office of the [industrial commission], setting forth in detail his reasons therefor, and the [industrial commission] may issue an order canceling the employment certificate of such child. Such order of cancellation shall be served, and the child's employment certificate delivered up, as provided in subdivision two hereof, and no such child while the said order of cancellation remains unrevoked shall be permitted or suffered to work in any factory of the State before it attains the age of sixteen years. If upon a subsequent physical examination of the child by a medical inspector of the department of labor it appears that the physical infirmities have been removed, such medical inspector shall certify to that effect to the [industrial commission], and the [industrial commission] may thereupon make an order revoking the cancellation of the employment certificate and may return the certificate to such child. The order of revocation shall be served in the manner provided in subdivision two hereof. [C L 1909 v 3 Labor C 31 art 6 s 76-a as added by 1913 C 200]

<sup>1</sup> For penalty for misdemeanor, see page 131 (Consolidated Laws 1906, volume 4, Penal, chapter 40, article 174, section 1937).

## EDUCATIONAL REQUIREMENTS.

## COMPULSORY SCHOOL ATTENDANCE.

*Enforcement: lists of alien children to be procured by industrial commission.—*

\* \* \* \* \*

2. The [industrial commission] shall procure with the consent of the Federal authorities complete lists giving the names, ages, and destination within the State of all alien children of school age, and such other facts as will tend to identify them, and shall forthwith deliver copies of such lists to the commissioner of education or the several boards of education and school boards in the respective localities within the State to which said children shall be destined, to aid in the enforcement of the provisions of the education law relative to the compulsory attendance at school of children of school age. [C L 1909 v 3 Labor C 31 art 11 (as renumbered by 1913 C 145) s 153 as added by 1910 C 514 and amended by 1912 C 543]

## MERCANTILE ESTABLISHMENTS, THEATERS, STREET TRADES, MESSENGERS, ETC.

## APPLICATION OF ACT.

*Certain cities.*—The provisions of this article shall apply to all villages and cities which at the last preceding State enumeration had a population of three thousand or more. [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 160]

## MINIMUM AGE AND EMPLOYMENT CERTIFICATES AND RECORDS.

*Employment under 14 prohibited; certificates required from 14 to 16.*—No child under the age of fourteen years shall be employed or permitted to work in or in connection with any mercantile or other business or establishment specified in the preceding section [mercantile establishment, business office, telegraph office, restaurant, hotel, apartment house, theater or other place of amusement, bowling alley, barber shop, shoe-polishing establishment, or in the distribution or transmission of merchandise, articles or messages, or in the distribution or sale of articles]. No child under the age of sixteen years shall be so employed or permitted to work unless an employment certificate, issued as provided in this article, shall have been theretofore filed in the office of the employer at the place of employment of such child. [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 162 as amended by 1911 C 866]

*Commissioner of health to issue certificates; age, school, and health records required; method of issuing.*—[This section is practically identical with section 71, article 6 of this chapter.] [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 163 as amended by 1913 C 144]

*Contents of certificates.*—[This section is practically identical with section 72, article 6 of this chapter.] [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 164]

*Contents of school records; educational requirements.*—[This section is practically identical with section 73, article 6 of this chapter.] [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 165 as amended by 1913 C 144]

*Enforcement; duties and powers of industrial commission; lists of certificates to be sent to industrial commission; blank certificates, etc.*—[This section is practically identical with section 75, article 6 of this chapter.] [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 166 as added by 1913 C 144]

*Lists required under 16; certificates to be returned to child or parent; evidence of a may be required for child apparently under 16; false statement a misdemeanor; evidence of illegal employment.*—[This section is practically identical with section 76, article 6 of this chapter, except that in section 76 the provisions are enforced by the [industrial commission] and in this section by the [industrial commission] in cities of the first and second classes and by the health officers in other cities, villages, etc.] [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 167 as amended by 1913 C 145]

## ALL REGULATED OCCUPATIONS.

## ENFORCEMENT.

*Duties and powers of industrial commission, health commissioners, etc.*—Except in cities of the first and second class the board or department of health or health commissioners of a town, village or city affected by this article shall enforce the same

and prosecute all violations thereof. Proceedings to prosecute such violations must be begun within sixty days after the alleged offense was committed. All officers and members of such boards or department[s], all health commissioners, inspectors and other persons appointed or designated by such boards, departments or commissioners may visit and inspect, at reasonable hours and when practicable and necessary, all mercantile or other establishments herein specified within the town, village or city for which they are appointed. No person shall interfere with or prevent any such officer from making such visitations and inspections, nor shall he be obstructed or injured by force or otherwise while in the performance of his duties. All persons connected with any such mercantile or other establishment herein specified shall properly answer all questions asked by such officer or inspector in reference to any of the provisions of this article. In cities of the first and second class the [industrial commission] shall enforce the provisions of this article, and for that purpose [said commission] and [its] subordinates shall possess all powers herein conferred upon town, village, or city boards and departments of health and their commissioners, inspectors, and other officers, except that the board or department of health of said cities of the first and second class shall continue to issue employment certificates as provided in section one hundred and sixty-three of this chapter. [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 172 as amended by 1913 C 145]

*Copy of law to be posted under certain conditions.*—A copy or abstract of applicable provisions of this chapter and of the rules and regulations of the [industrial commission] to be prepared and furnished by the [industrial commission] shall be kept posted by the employer in a conspicuous place on each floor of every mercantile or other establishment specified in article twelve of this chapter situated in cities of the first or second class, wherein three or more persons are employed who are affected by such provisions. [C L 1909 v 3 Labor C 31 art 12 (as renumbered by 1913 C 145) s 173 as amended by 1913 C 145]

## EDUCATIONAL REQUIREMENTS.

### COMPULSORY SCHOOL AND EVENING AND CONTINUATION SCHOOL ATTENDANCE.

*Instruction required.*—The instruction required under this article shall be:

1. At a public school in which at least the six common school branches of reading, spelling, writing, arithmetic, English language and geography are taught in English.
2. Elsewhere than a public school upon instruction in the same subjects taught in English by a competent teacher. [C L 1910 v 8 Education C 16 art 23 s 620]

*Children from 7 to 14 in certain cities, from 8 to 14 in certain other cities, and from 14 to 16 if not regularly and lawfully employed.*—1. Every child within the compulsory school ages, in proper physical and mental condition to attend school, residing in a city or school district having a population of five thousand or more and employing a superintendent of schools, shall regularly attend upon instruction as follows:

(a) Each child between seven and fourteen years of age shall attend the entire time during which the school attended is in session, which period shall be not less than one hundred and sixty days of actual school.

(b) Each child between fourteen and sixteen years of age not regularly and lawfully engaged in any useful employment or service, and to whom an employment certificate has not been duly issued under the provisions of the labor law, shall so attend the entire time during which the school attended is in session.

2. Every such child, residing elsewhere than in a city or school district having a population of five thousand or more and employing a superintendent of schools, shall attend upon instruction during the entire time that the school in the district shall be in session as follows:

(a) Each child between eight and fourteen years of age.

(b) Each child between fourteen and sixteen years of age not regularly and lawfully engaged in any useful employment or service. \* \* \* [C L 1910 v 8 Education C 16 art 23 s 621 as amended by 1911 C 710 and by 1913 C 511]

*Boys from 14 to 16 to attend evening or continuation schools and girls from 14 to 16 to attend continuation schools under certain conditions.*—1. Every boy between fourteen and sixteen years of age, in a city of the first class or a city of the second class in possession of an employment certificate duly issued under the provisions of the labor law, who has not completed such course of study as is required for graduation from the elementary public schools of such city, and who does not hold either a certificate of graduation from the public elementary school or the preacademic certificate issued by the regents or the certificate of the completion of an elementary course issued by the education department, shall attend the public evening schools of such city, or

other evening schools offering an equivalent course of instruction, for not less than six hours each week, for a period of not less than sixteen weeks.

2. When the board of education in a city or district shall have established part-time and continuation schools or courses of instruction for the education of young persons between fourteen and sixteen years of age who are regularly employed in such city or district, said board of education may require the attendance in such schools or on such courses of instruction of any young person in such a city or district who is in possession of an employment certificate duly issued under the provisions of the labor law, who has not completed such courses of study as are required for graduation from the elementary public schools of such city or district, or equivalent courses of study in parochial or other elementary schools, who does not hold either a certificate of graduation from the public elementary school or a preacademic certificate of the completion of the elementary course issued by the education department, and who is not otherwise receiving instruction approved by the board of education as equivalent to that provided for in the schools and courses of instruction established under the provisions of this act. The required attendance provided for in this paragraph shall be for a total of not less than thirty-six weeks per year, at the rate of not less than four and not more than eight hours per week, and shall be between the hours of eight o'clock in the morning and five o'clock in the afternoon of any working day or days.

3. The children attending such part-time or continuation schools as required in paragraph two of this section shall be exempt from the attendance on evening schools required in paragraph one of this section. [C L 1910 v 8 Education C 16 art 23 s 622 as amended by 1913 C 748]

*Regulations for attendance at other than public schools.*—If any such child shall so attend upon instruction elsewhere than at a public school, such instruction shall be at least substantially equivalent to the instruction given to children of like age at the public school of the city or district in which such child resides; and such attendance shall be for at least as many hours each day thereof as are required of children of like age at public schools; and no greater total amount of holidays and vacations shall be deducted from such attendance during the period such attendance is required than is allowed in such public schools to children of like age. Occasional absences from such attendance, not amounting to irregular attendance in the fair meaning of the term, shall be allowed upon such excuses only as would be allowed in like cases by the general rules and practice of such public school. [C L 1910 v 8 Education C 16 art 23 s 623]

*Children from 7 to 14 in certain districts and from 14 to 16 unless regularly and lawfully employed; from 8 to 16 in other districts, unless regularly and lawfully employed, etc.*—Every person in parental relation to a child within the compulsory school ages and in proper physical and mental condition to attend school, shall cause such child to attend upon instruction, as follows:

1. In cities and school districts having a population of five thousand or above, every child between seven and sixteen years of age as required by section six hundred and twenty-one of this act unless an employment certificate shall have been duly issued to such child under the provisions of the labor law and he is regularly employed thereunder.

2. Elsewhere than in a city or school district having a population of five thousand or above, every child between eight and sixteen years of age, unless such child shall have received an employment certificate duly issued under the provisions of the labor law and is regularly employed thereunder in a factory or mercantile establishment, business or telegraph office, restaurant, hotel, apartment house or in the distribution or transmission of merchandise or messages, or unless such child shall have received the school record certificate issued under section six hundred and thirty of this act and is regularly employed elsewhere than in the factory or mercantile establishment, business or telegraph office, restaurant, hotel, apartment house or in the distribution or transmission of merchandise or messages. [C L 1910 v 8 Education C 16 art 23 s 624]

*Penalty for preceding section.*—A violation of section six hundred and twenty-four shall be a misdemeanor, punishable for the first offense by a fine not exceeding five dollars, or five days' imprisonment, and for each subsequent offense by a fine not exceeding fifty dollars, or by imprisonment not exceeding thirty days, or by both such fine and imprisonment. \* \* \* [C L 1910 v 8 Education C 16 art 23 s 625]

## ALL OCCUPATIONS—EDUCATIONAL REQUIREMENTS.

### MINIMUM AGE AND EMPLOYMENT CERTIFICATES.

*Employment under 14 prohibited during school hours; employment and school record certificates required from 14 to 16 for employment in certain occupations elsewhere than in cities of the first and second class; employment certificates required from 14 to 16 in cities of the first and second class.*—It shall be unlawful for any person, firm or corporation:

1. To employ [employ] any child under fourteen years of age, in any business or service whatever, for any part of the term during which the public schools of the district or city in which the child resides are in session.

2. To employ, elsewhere than in a city of the first class or a city of the second class, in a factory or mercantile establishment, business or telegraph office, restaurant, hotel, apartment house or in the distribution or transmission of merchandise or messages, any child between fourteen and sixteen years of age who does not at the time of such employment present an employment certificate duly issued under the provisions of the labor law, or to employ any such child in any other capacity who does not at the time of such employment present a school record certificate as provided in section six hundred and thirty of this chapter.

3. To employ any child between fourteen and sixteen years of age in a city of the first class or a city of the second class who does not, at the time of such employment, present an employment certificate, duly issued under the provisions of the labor law. [C L 1910 v 8 Education C 16 art 23 s 626]

NOTE.—[The provisions for employment certificates as provided for in this article are apparently superseded by articles 6 and 12, chapter 31, volume 3, Labor, Consolidated Laws 1909.]

*Certificates to be displayed from 14 to 16.*—The employer of any child between fourteen and sixteen years of age in a city or district shall keep and shall display in the place where such child is employed, the employment certificate and also his evening, part-time or continuation school certificate issued by the school authorities of said city or district or by an authorized representative of such school authorities, certifying that the said child is regularly in attendance at an evening, part-time or continuation school of said city as provided in section six hundred and thirty-one of this chapter. [C L 1910 v 8 Education C 16 art 23 s 627 as amended by 1913 C 748]

*Penalty for illegal employment.*—Any person, firm, or corporation, or any officer, manager, superintendent or employee acting therefor, who shall employ any child contrary to the provisions of sections six hundred and twenty-six and six hundred and twenty-seven hereof shall be guilty of a misdemeanor, and the punishment therefor shall be for the first offense a fine of not less than twenty dollars nor more than fifty dollars; for a second and each subsequent offense, a fine of not less than fifty dollars nor more than two hundred dollars. [C L 1910 v 8 Education C 16 art 23 s 628 as amended by 1913 C 748]

*Court decision.*—The section of which this is an amendment was held constitutional.—City of New York v. Chelsea Jute Mills, 43 Misc. 266, 88 N. Y. S. 1085 (1904).

#### COMPULSORY SCHOOL ATTENDANCE.

*Enforcement: duties of teachers; misdemeanor.*—An accurate record of the attendance of all children between seven and sixteen years of age shall be kept by the teacher of every school, showing each day by the year, month, day of the month and day of the week, such attendance, and the number of hours in each day thereof; and each teacher upon whose instruction any such child shall attend elsewhere than at school, shall keep a like record of such attendance. Such record shall, at all times, be open to the attendance officers or other person duly authorized by the school authorities of the city or district, who may inspect or copy the same; and every such teacher shall fully answer all inquiries lawfully made by such authorities, inspectors, or other persons, and a willful neglect or refusal so to answer any such inquiry shall be a misdemeanor.<sup>1</sup> [C L 1910 v 8 Education C 16 art 23 s 629]

#### SCHOOL-RECORD CERTIFICATES.

*School authorities to issue certificates; contents of certificate.*—1. A school-record certificate shall contain a statement certifying that a child has regularly attended the public schools, or schools equivalent thereto, or parochial schools, for not less than one hundred and thirty days during the twelve months next preceding his fourteenth birthday or during the twelve months next preceding his application for such school record, and that he is able to read and write simple sentences in the English language and has received during such period instruction in reading, writing, spelling, English grammar and geography and is familiar with the fundamental operations of arithmetic up to and including fractions, and has completed the work prescribed for the first six years of the public elementary school, or school equivalent thereto, or parochial school, from which such school record is issued. Such record shall also give the date of birth and residence of the child, as shown on the school records, and the name of the child's parents, guardian or custodian.

<sup>1</sup> For penalty for misdemeanor, see p. 131 (Consolidated Laws 1909, volume 4, Penal, chapter 40, article 174, section 1937).

2. A teacher or superintendent to whom application shall be made for a school-record certificate required under the provisions of the labor law shall issue a school-record certificate to any child who, after due investigation and examination, may be found to be entitled to the same as follows:

- a. In a city of the first class by the principal or chief executive of a school.
- b. In all other cities and in school districts having a population of five thousand or more and employing a superintendent of schools, by the superintendent of schools only.
- c. In all other school districts by the principal teacher of the school.
- d. In each city or school district such certificate shall be furnished on demand to a child entitled thereto or to the board or commissioner of health. [C L 1910 v 8 Education C 16 art 23 s 630 as amended by 1913 C 101]

*School authorities to issue evening or continuation school certificates; requirements for and contents of certificates.*—The school authorities in a city or district, or officers designated by them, are hereby required to issue to each child lawfully in attendance at an evening, part-time or continuation school, an evening, part-time or continuation school certificate at least once in each month during the months said evening, part-time or continuation school is in session and at the close of the term of said evening, part-time or continuation school: *Provided*, That said child has been in attendance upon said evening school, for not less than six hours each week or upon said part-time or continuation school for not less than four hours each week, for such number of weeks as will, when taken in connection with the number of weeks such evening, part-time or continuation school respectively, shall be in session during the remainder of the current or calendar year, make up a total attendance on the part of said child in said evening school, of not less than six hours per week for a period of not less than sixteen weeks or in said part-time or continuation school, of not less than four hours per week for a period of not less than thirty-six weeks. Such certificate shall state fully the period of time which the child to whom it is issued was in attendance upon such evening, part-time or continuation school. [C L 1910 v 8 Education C 16 art 23 s 631 as amended by 1913 C 748]

#### ENFORCEMENT.

*Duties and powers of attendance officers and superintendent of schools, etc.*—1. The school authorities of each city, union free school district, or common school district whose limits include in whole or in part an incorporated village, shall appoint and may remove at pleasure one or more attendance officers of such city or district, and shall fix their compensation and may prescribe their duties not inconsistent with this article and make rules and regulations for the performance thereof; and the superintendent of schools shall supervise the enforcement of this article within such city or school district.

2. The town board of each town shall appoint, subject to the written approval of the school commissioner of the district, one or more attendance officers, whose jurisdiction shall extend over all school districts in said town, and which are not by this section otherwise provided for, and shall fix their compensation, which shall be a town charge; and such attendance officers, appointed by said board, shall be removable at the pleasure of the school commissioner in whose commissioner district such town is situated. [C L 1910 v 8 Education C 16 art 23 s 632]

*Powers of truant officers.*—

\* \* \* \* \*

3. A truant officer in the performance of his duties may enter, during business hours, any factory, mercantile or other establishment within the city or school district in which he is appointed and shall be entitled to examine employment certificates or registry of children employed therein on demand. [C L 1910 v 8 Education C 16 art 23 s 633]

#### PENALTIES.

*Hindering attendance officers, etc., a misdemeanor.*—Any person interfering with an attendance officer in the lawful discharge of his duties and any person owning or operating a factory, mercantile or other establishment who shall refuse on demand to exhibit to such attendance officer the registry of the children employed or the employment certificate of such children shall be guilty of a misdemeanor.<sup>1</sup> [C L 1910 v 8 Education C 16 art 23 s 634]

*School moneys may be withheld from cities and districts not enforcing law.*—1. The commissioner of education shall supervise the enforcement of this law and he may withhold one-half of all public school moneys from any city or district, which, in his judg-

<sup>1</sup> For penalty for misdemeanor, see page 131 (Consolidated Laws 1909, volume 4, Penal, chapter 40, article 174, section 1937).



ment, willfully omits and refuses to enforce the provisions of this article, after due notice, so often and so long as such willful omission and refusal shall, in his judgment, continue. \* \* \* [C L 1910 v 8 Education C 16 art 23 s 636]

## SCHOOL CENSUS.

*Enumeration of children from 4 to 18; duties of permanent census board in cities of the first class except New York.*—A permanent census board is hereby established in each city of the first class, except the city of New York. In the city of New York provision shall be made by the board of education for taking a school census in connection with the work of enforcing the compulsory education law. Such permanent census board shall consist of the mayor, the superintendent of schools, the police commissioner or officer performing duties similar to those of a police commissioner. The mayor shall be the chairman of such board. Such board shall have power to make such rules and regulations as may be necessary to carry out the provisions of this article. Such board shall have power to appoint a secretary and such clerks and other employees as may be necessary to carry out the provisions of this article and to fix the salaries of the same. Such board shall ascertain through the police force, the residences and employments of all persons between the ages of four and eighteen years residing within such cities and shall report thereon from time to time to the school authorities of such cities. Under the regulations of such board, during the month of October, nineteen hundred and nine, it shall be the duty of the police commissioners in such cities of the first class to cause a census of the children of their respective cities to be taken. Thereafter such census shall be amended from day to day by the police, precinct by precinct, as changes of residence occur among the children of such cities within the ages prescribed in this article and as other persons come within the ages prescribed herein and as other persons within such ages shall become residents of such cities, so that said board shall always have on file a complete census of the names and residences of the children between such ages and of the persons in parental relation thereto. It shall be the duty of persons in parental relation to any child residing within the limits of said cities of the first class to report at the police station house of the precinct within which they severally reside, the following information:

1. Two weeks before any child becomes of the compulsory school age the name of such child, its residence, the name of the person or persons in parental relation thereto, and the name and location of the school to which such child is sent as a pupil.

2. In case a child of compulsory school age is for any cause removed from one school and sent to another school, or sent to work in accordance with the labor law, all the facts in relation thereto.

3. In case the residence of a child is removed from one police precinct to another police precinct, the new residence and the other facts required in the two preceding subdivisions.

4. In case a child between the ages of four and eighteen becomes a resident of one of said cities of the first class for the first time the residence and such other facts as the census board shall require. Such census shall include all persons between the ages of four and eighteen years, the day of the month and the year of the birth of each of such persons, their respective residences by street and number, the names of their parents or guardians, such information relating to illiteracy and to the enforcement of the law relating to child labor and compulsory education as the school authorities of the State and of such cities shall require and also such further information as such authorities shall require. [C L 1910 v 8 Education C 16 art 24 s 650 as amended by 1914 C 480]

*Enumeration of children from 4 to 18 in New York City; duties of bureau of compulsory education, school census, and child welfare.*—The board of education shall have power to establish a bureau of compulsory education, school census and child welfare and subject to the provisions of law and of this act, the said board shall have power to make by-laws, rules, regulations and prescribe forms for the proper performance of the duties of all persons employed in and under the direction of said bureau. On the nomination of the board of superintendents the board of education shall have power to appoint a director and an assistant director of the said bureau for a term of six years each, and such attendance officers, enumerators, clerks and other employees as may be necessary, and to fix their salaries within the proper appropriation; to assign a chief attendance officer, and one or more attendance officers as supervising attendance officers for such periods as may be prescribed in the by-laws of the board of education. No person shall be eligible for the position of director or of assistant director of the said bureau who has not one of the following qualifications: (a) Graduation from a college or university recognized by the University of the State of New

York, together with five years' experience in teaching or supervision since graduation. (5) A principal's license for any of the boroughs of the city of New York obtained as the result of an examination, together with ten years' experience in teaching or supervision. The director and assistant director shall be participants in the teachers' retirement fund under section ten hundred and ninety-two of the charter of the city of New York and be subject to its provisions. Attendance officers employed under the direction of the said bureau shall perform duties in connection with the enforcement of the compulsory education law, in the taking of a school census, and in connection with the employment of children under the labor law, and such other duties, not inconsistent with this act, as the director of the bureau or the board of education may prescribe. It shall be the duty of persons in parental relation to any child between the ages of four and eighteen years residing in the city of New York to give to the educational authorities of the district within which they severally reside, all the information prescribed in section six hundred and fifty of article twenty-four of the education law of the State relating to such child, and such other information as may be required. Persons in parental relation who withhold such information shall be liable to the penalty prescribed in section six hundred and fifty-three of article twenty-four of the education law of the State. It shall be the duty of attendance officers, acting as census enumerators, to collect the information prescribed in section six hundred and fifty of article twenty-four of the education law and such other information as the State commissioner of education or the board of education may require. The director of the bureau of compulsory education, school census and child welfare, herein established, shall, subject to the by-laws of the board of education and in its name, enforce the compulsory education law, direct attendance officers in their duty, commit and parole truant and delinquent children and proceed against those in parental relation in the manner provided in section six hundred and thirty-five of chapter one hundred and forty of the laws of nineteen hundred and ten as amended, any provision of the said law or of section ten hundred and seventy-eight of the charter of the city of New York to the contrary notwithstanding. The assistant director shall perform such duties in connection with the supervision of the school census, or otherwise, as the director, subject to the by-laws of the board of education, may prescribe. Under the direction of the board of education the city superintendent of schools shall have a general supervision of the bureau of compulsory education, school census and child welfare. On or about May first, nineteen hundred and fourteen, the board of education shall ascertain the information required by section six hundred and fifty of article twenty-four of the education law of the State relating to a census of all persons within the city of New York between the ages of four and eighteen years of age. Thereafter such census shall be amended from day to day by attendance officers, clerks and other employees under the supervision of the director, as changes of residence occur among children of such city within the ages prescribed in this article, and as other persons come within the ages prescribed, and as other persons within such ages shall become residents of such city, so that the said board of education in its census bureau shall always have on file a complete census of the names and residences of the children between such ages and of the persons in parental relation thereto. [Greater New York Charter 1901 C 461 s 1069 subdivision 8 as added by 1914 C 479]

*Enumeration of children from 4 to 18; duties of permanent census board or school authorities in other than cities of the first class.*—A permanent census board may be established in any city not of the first class, in accordance with the provisions of this article. If a census board shall not be established in such cities, then, during the month of October, nineteen hundred and nine, and in the month of October every fourth year thereafter, the school authorities of every city, not a city of the first class, shall take a census of the children of their respective cities. Such census shall include the information required from the cities of the first class as provided in section six hundred and fifty of this chapter. [C L 1910 v 8 Education C 16 art 24 s 651]

*Enumeration of children from 5 to 18; duties of boards of trustees in school districts.*—The board of trustees of every school district shall annually on the thirtieth day of August cause a census of all children between the ages of five and eighteen years to be taken in their respective school districts. Such census shall include the information required from cities as provided in this article. [C L 1910 v 8 Education C 16 art 24 s 652]

*Penalty for false information, etc.*—A parent, guardian or other person having under his control or charge a child between the ages of four and eighteen years who withholds or refuses to give information in his possession relating to such child and required under this article, or any such parent, guardian or other person who gives false information in relation thereto, shall be liable to and punished by fine not exceeding twenty dollars or by imprisonment not exceeding thirty days. [C L 1910 v 8 Education C 16 art 24 s 653]

## ALL REGULATED OCCUPATIONS.

## PENALTIES.

*Violation of labor laws and false statements.*—Any person who violates or does not comply with any provision of the labor law, any provision of the industrial code, any rule or regulation of the [industrial commission] \* \* \* or any lawful order of the [industrial commission]; and any person who knowingly makes a false statement in or in relation to any application made for an employment certificate as to any matter required by articles six \* \* \* of the labor law to appear in any affidavit, record, transcript or certificate therein provided for, is guilty of a misdemeanor and upon conviction shall be punished, except as in this chapter otherwise provided, for a first offense by a fine of not less than twenty nor more than fifty dollars; for a second offense by a fine of not less than fifty nor more than two hundred and fifty dollars, or by imprisonment for not more than thirty days or by both such fine and imprisonment; for a third offense by a fine of not less than two hundred and fifty dollars, or by imprisonment for not more than sixty days, or by both such fine and imprisonment. [C L 1909 v 4 Penal C 40 art 120 s 1275 as amended by 1913 C 349]

*Misdemeanor.*—A person convicted of a crime declared to be a misdemeanor, for which no other punishment is specially prescribed by this chapter, or by any other statutory provision in force at the time of the conviction and sentence, is punishable by imprisonment in a penitentiary, or county jail, for not more than one year, or by a fine of not more than five hundred dollars, or by both. [C L 1909 v 4 Penal C 40 art 174 s 1937]

## AMENDMENTS TO EMPLOYMENT-CERTIFICATE LAW.

In effect Feb. 1, 1917.

[Acts of 1916, ch. 465, sec. 1, amending Labor Law, sec. 71. Section 2 of the same act amends Labor Law, sec. 163, to read exactly like section 71 as amended. Portions in brackets were in the original law but are omitted in the amendment; portions in italics were not in the original law but are added in the amendment.]

*Employment certificate, how issued.*—Such certificate shall be issued by the commissioner of health or the executive officer of the board or department of health of the city, town or village where such child resides[,] or is to be employed, or by such other officer thereof as may be designated by such board, department or commissioner for that purpose, upon the application of the parent [or], guardian or custodian of the child desiring such employment. Such officer shall not issue such certificate until he has received, examined, approved and filed the following papers duly executed, namely: The school record of such child properly filled out and signed as provided in this article; also, evidence of age showing that the child is fourteen years old or upwards, which shall consist of the evidence thereof provided in one of the following subdivisions of this section and which shall be required in the order herein designated as follows:

(a) Birth certificate[]; *passport or baptismal certificate.* A duly attested transcript of the birth certificate filed according to law with a registrar of vital statistics or other officer charged with the duty of recording births[, which certificate shall be conclusive evidence of the age of such child.]; *or a passport; or a duly attested transcript of a certificate of baptism showing the date of birth of such child.*

[(b) Certificate of graduation. A certificate of graduation duly issued to such child showing that such child is a graduate of a public school of the State of New York or elsewhere, having a course of not less than eight years, or of a school in the State of New York other than a public school, having a substantially equivalent course of study of not less than eight years' duration, in which a record of the attendance of such child has been kept as required by article twenty of the education law, provided that the record of such school shows such child to be at least fourteen years of age.

(c) *Passport or baptismal certificate.* A passport or a duly attested transcript of a certificate of baptism showing the date of birth and place of baptism of such child.]

[(d)] (b) Other documentary evidence. In case it shall appear to the satisfaction of the officer to whom application is made, as herein provided, for an employment certificate, that a child for whom such certificate is requested[,] and who has presented the school record, is in fact over fourteen years of age, and that satisfactory documentary evidence of age can be produced, which does not fall within any of the provisions of the preceding subdivisions of this section, and that none of the papers mentioned in said subdivisions can be produced, then and not otherwise he shall present to the board of health of which he is an officer or agent, for its action thereon, a statement signed by him showing such facts, together with such [affidavits or] papers as may have been produced before him constituting such evidence [of the age of such child, and the board of health, at a regular meeting thereof, may then, by resolution, provide that such evidence of age shall be fully entered on the minutes of such board, and shall be received as sufficient evidence of the age of such child for the purpose of this section]. *The commissioner of health, or when officially authorized, the issuing officer of the board or department of health may then accept such evidence as sufficient as to the age of such child, and a record of such evidence shall be fully entered on the minutes of the board at the next meeting thereof.*

[(e)] (c) Physicians' certificates. In cities of the first class only, in case application for the issuance of an employment certificate shall be made to such officer by a child's parent, guardian or custodian who alleges his inability to produce any of the evidence of age specified in the preceding subdivisions of this section, and if the child is apparently at least fourteen years of age, such officer may receive and file an application signed by the parent, guardian or custodian of such child for physicians' certificates. Such application shall contain the alleged age, place and date of birth, and present residence of such child, together with such further facts as may be of assistance in determining the age of such child. Such application shall be filed for not less than [ninety] *sixty* days after date of such application for such physicians' certificates, for an examination to be made of the statements contained therein, and in case no facts

appear within such period or by such examination tending to discredit or contradict any material statement of such application, then and not otherwise the officer may direct such child to appear thereafter for physical examination before two physicians officially designated by the board of health, and in case such physicians shall certify in writing that they have separately examined such child and that in their opinion such child is at least fourteen years of age such officer shall accept such certificates as sufficient proof of the age of such child for the purposes of this section. In case the opinions of such physicians do not concur, the child shall be examined by a third physician and the concurring opinions shall be conclusive for the purpose of this section as to the age of such child.

Such officer shall require the evidence of age specified in subdivision (a) in preference to that specified in any subsequent subdivision and shall not accept the evidence of age permitted by any subsequent subdivision unless he shall receive and file in addition thereto an affidavit of the parent showing that no evidence of age specified in any preceding subdivision or subdivisions of this section can be produced. Such affidavit shall contain the age, place and date of birth, and present residence of such child, which affidavit must be taken before the officer issuing the employment certificate, who is hereby authorized and required to administer such oath and who shall not demand or receive a fee therefor.

Such employment certificate shall not be issued until such child further has personally appeared before and been examined by the officer issuing the certificate, and until such officer shall, after making such examination, sign and file in his office a statement that the child can read and [legibly] write *correctly* simple sentences in the English language and that in his opinion the child is fourteen years of age or upwards and has reached the normal development of a child of its age, and is in sound health and is physically able to perform the work which it intends to do. Every such employment certificate shall be signed, in the presence of the officer issuing the same, by the child in whose name it is issued. In every case, before an employment certificate is issued, such physical fitness shall be determined by a medical officer of the department or board of health, who shall make a thorough physical examination of the child and record the result thereof on a blank to be furnished for the purpose by the [State commissioner of labor] *industrial commission* and shall set forth thereon such facts concerning the physical condition and history of the child as the [commissioner of labor] *industrial commission* may require.

*In case the evidence of age, filed as in this section provided, shows such child to be fourteen years old but fails to show such child to be fifteen years old, no employment certificate shall be issued unless such child, in addition to complying with all the requirements of this section and producing the school record described in section seventy-three, shall also present a certificate of graduation properly issued in the name of such child, from a public elementary school, or school equivalent thereto or parochial school, or a preacademic certificate issued by the regents, or a certificate of the completion of an elementary course issued by the education department.*

## FORMS USED IN THE ADMINISTRATION OF EMPLOYMENT-CERTIFICATE LAWS.

[The words in italics are as entered by hand on the blank forms, but all names and addresses, except those of some of the officials, are fictitious. Lines inclosed in brackets [ ] are interpolated and do not appear in the forms as used.]

[Form 1. See p. 13.]

UNIVERSITY OF THE STATE OF NEW YORK,  
THE STATE DEPARTMENT OF EDUCATION.

### SCHOOL RECORD.

To the Board of Health City of *Little Falls*:  
*town*

GENTLEMEN: I hereby certify that *Rosa Spence* was a pupil in *Lincoln* school in the city of *Little Falls*, State of *New York*; that her attendance at the said school was not less than 130 days during the 12 months next preceding her 14th birthday or the 12 months next preceding her application for a school-record certificate; that she is able to read and write simple sentences in the English language and received during such period instruction in English in reading, writing, spelling, English language and geography and is familiar with the fundamental operations of arithmetic up to and including fractions and has completed the work prescribed for the first six years of the public elementary school, or school equivalent thereto, or parochial school; that according to the records of the above-named school said pupil was born on the 10th day of *Sept.*, 1900 resides at *110 W. Main St.* in the city of *Little Falls* and the name of her parent, guardian, or custodian is *John Spence*.

[Signed] *JOHN DE LONG*,  
Superintendent, principal or chief executive officer of school.

(Dated) *Oct 12, 1914*.

This certificate when issued should be given to the child entitled to it, who should present it to the local board of health if an employment certificate is desired; otherwise it is to be retained by the child.

An exact record of all certificates issued shall be kept on file. Such record in part should contain the name, age and residence of each child to whom a certificate was granted, with the number of days' attendance credited to each within the period prescribed in the statute; also the date on which the certificate was issued.

#### Section 1275 of the penal law:

Any person who knowingly makes a false statement in or in relation to any application made for an employment certificate as to any matter required by articles 6 and 11 of the labor law to appear in any affidavit, record, transcript or certificate therein provided for, is guilty of a misdemeanor and upon conviction shall be punished for a first offense by a fine of not less than \$20 nor more than \$50; for a second offense by a fine of not less than \$50 nor more than \$250, or by imprisonment for not more than 30 days, or by both such fine and imprisonment; for a third offense by a fine of not less than \$250, or by imprisonment for not more than 60 days, or by both such fine and imprisonment.

JOHN HUSTON FINLEY,  
President of the University.

Approved by State Department of Labor.

[Form 2a. See p. 31.]

This certificate is effective throughout the State and until the owner is 16 years of age unless sooner revoked.

No. *846*.

### EMPLOYMENT CERTIFICATE.

Issued pursuant to sections 71 and 163 of the labor law of the State of New York, chapter 36, laws of 1909, as amended.

The Department of Health of *Syracuse, N. Y.*, upon application duly made pursuant to law, grants this certificate to *John Baker* and it is hereby certified that this child, who is described below, personally

(Name of child.)

appeared before the undersigned official and was by him examined and found qualified for employment under the labor law; it is further certified that documentary evidence of the age and education of said child, as required by law, has been duly examined, approved, and made a part of the records of the above department, and that by careful examination the physical fitness of the said child has been determined by the medical examiner of the above department and that such physical examination has been recorded as required by law.

#### DESCRIPTION OF CHILD.

Place of birth *Utica, N. Y.*  
Color of hair *Brown*.  
Height *4 feet 6 inches*.  
Distinguishing facial marks *none*.

Date of birth *June 21, 1900*.  
Color of eyes *Blue*.  
Weight *100*.

*JOHN BAKER*,

Signature of child named in the above certificate.

Date *July 2, 1915*.

THE BOARD OF HEALTH.  
By *F. W. SEARS*,  
Signature of official issuing certificate.

N. B.—This certificate must be filed with the employer, and must be kept on file in the office at the place of employment during the period of such employment. It shall be surrendered to the child, its parent, guardian, or custodian upon the termination of the child's employment.

(OVER)

[Form 2b. See p. 31.]

This certificate is effective throughout the State and until the owner is 16 years of age unless sooner revoked.

No. 7548.

## EMPLOYMENT CERTIFICATE.

Issued pursuant to sections 71 and 163 of the labor law of the State of New York, chapter 36, Laws of 1909, as amended.

The Department of Health of City of New York, upon application duly made pursuant to law, grants this certificate to *Lawrence Flynn* and it is hereby certified that this child, who is described below, personally appeared before the undersigned official and was by him examined and found qualified for employment under the labor law; it is further certified that documentary evidence of the age and education of said child, as required by law, has been duly examined, approved, and made a part of the records of the above department, and that by careful examination the physical fitness of the said child has been determined by the medical examiner of the above department and that such physical examination has been recorded as required by law.

## DESCRIPTION OF CHILD.

Place of birth *Rochester, N. Y.*Color of hair *Brown.*Height *5 feet 6½ inches.*

Distinguishing physical marks ———.

Date of birth *Aug. 7, 1899.*Color of eyes *Blue.*Weight *103 lbs.*sex *Male.*

THE BOARD OF HEALTH.

*LAURENCE FLYNN*

Signature of child named in the above certificate.

Address *173 W. 81st. St.*By *JOHN J. O'BRIEN,*

Signature of official issuing certificate.

Date *March 12, 1914.*

N. B.—This certificate must be filed with the employer, and must be kept on file in the office at the place of employment during the period of such employment. It shall be surrendered to the child, its parent, guardian, or custodian upon the termination of the child's employment.

(OVER)

[Forms 2a and 2b (reverse). See p. 31.]

## IMPORTANT.

## NOTICE TO EMPLOYERS.

**FACTORIES:** In factories the child presenting this certificate shall not be permitted to work before 8 o'clock in the morning or after 5 o'clock in the afternoon, or for more than 8 hours in any one day or more than six days in any one week. (Section 77, Labor Law.)

Special attention is called to OCCUPATIONS at which children can not be employed, enumerated in section 93, Labor Law.

**MERCANTILE ESTABLISHMENTS:** In mercantile establishments the child presenting this certificate shall not be permitted to work before 8 o'clock in the morning or after 6 o'clock in the evening, or for more than 8 hours in any one day or more than six days in any one week. (Section 161, Labor Law.)

[Form 3. See p. 80.]

*Thomas Blake.*

Signature of child.

*14 Pitt St.*

Home address.

*London, Eng., Nov. 10, 1899*

Place and date of birth.

*John & Mary Blake.*

Father's and mother's name.

*Packing.*

Work actually engaged in.

*July 9, 1914.*  
When employed.*\$5.*  
Wages.*8½*  
Daily hours.*8*  
Commence.*5*  
Stop work.*½*  
Noon day recess*Robt. Walton, foreman.*

By whom employed.

*National Cigar Co.*

Business title of firm or company.

*17 Monroe St.*

Address.

*J. K. Smith, supt. of factory.*

Person in authority seen by deputy.

*Nov. 3, 1914.*  
Date of inspection.*3 p. m.*  
Time of day.*J. C. Howard.*  
Factory inspector.

[FORM 4. See p. 80.]

STATE OF NEW YORK,  
[SEAL] DEPARTMENT OF LABOR,  
BUREAU OF FACTORY INSPECTION.

Albany, April 13, 1914.

In accordance with the provisions of section 76 of chapter 36, Laws of 1909, as amended, you are hereby directed to furnish to this department, within ten days, proper evidence that the child named herein and who is now employed, permitted or suffered to work in your manufacturing establishment, is in fact over sixteen years of age: (For the kind of evidence that will be considered, see the back of this sheet.)

Name and address of child (as furnished to inspector at time of inspection).

*Mary J. Dixon, 43 Williams Street.*

Failing to furnish the evidence herein called for you must immediately cease to employ or permit or suffer such child to work in your factory.

(OVER)

*M. LEWIS,*  
Chief Factory Inspector.

[FORM 4 (reverse). See p. 80.]

Evidence herein called for shall consist of:

(a) Birth certificate: A duly attested transcript of the birth certificate filed according to law with a registrar of vital statistics or other officer charged with the duty of recording births, which certificate shall be conclusive evidence of the age of such child.

(b) Certificate of graduation: A certificate of graduation duly issued to such child showing that such child is a graduate of a public school of the State of New York or elsewhere, having a course of not less than eight years, or of a school in the State of New York other than a public school, having a substantially equivalent course of study of not less than eight years' duration, in which a record of the attendance of such child has been kept as required by the compulsory education law, provided that the record of such school shows such child to be over sixteen years of age.

(c) Passport or baptismal certificate: A passport or a duly attested transcript of a certificate of baptism showing the date of birth and place of baptism of such child.

(d) Other evidence: In cases where it is impossible to produce any one of the above-mentioned documents, there shall be sent to the commissioner of labor a duly acknowledged affidavit from the parent or guardian of said child; the affidavit shall state the name, residence, date, and place of birth of said child, and that none of the documentary evidence mentioned above can be produced. There shall also be submitted in connection therewith a further affidavit or affidavits, from at least two physicians, stating that after due examination they are of the opinion that said child is upwards of the age of sixteen years.



[Form 5. See p. 81.]

 Insp. No. 436  
 Special.....  
 Date 4/17/16.

Building file No. 348765.

Formerly.....  
Give old business title or address if  
changed in 12 months.

Name John Doe Co.

If unincorporated and operating under  
an assumed business title, also add  
name of proprietor.F. I. { Reg. Insp. No. 436 L. B.—S. B. No. 28.  
Special..... Dist. No. 2-49.

Purpose of visit.

No. 285 Elm St. City or village N. Y. County N. Y. Boro. Man.

Front or rear.

Incorporated—President's name J. B. Jones Address 285 Monroe Ave., N. Y. C.

Owner, agent, or lessee of building George Blake Address 32 Wall St., N. Y. C.

No. of buildings 1 Stories 12  
In entire plant. Building covered by this report. (Of bldg. insp.)

Sta. Floors occupied. T. H. Sep. shop. Registered. Ten.—Factory.

Women's coats &amp; suits.

Chief product manufactured or work done. Specific product of bldg. insp.

Principal raw material used. Work done outside factory.

Date of last inspection. 9/14/15 James Green. Peter Spruce. Mgr.  
By whom. Person in authority seen. His position.

## Employees.

## Hours.

Sex and age.	In office, messengers, etc.	In workshops.	Total.	On full days.	On short day.	Total per week.
M 18+....		37	37	9	6	50
M 16-18....						
M 14-16....						
F 21+....		3	3	10(9)	6	64
F 16-21....		8	10	10(9)	6	64
F 14-16....		1	1	8	6	45
Total.....	8	49	51	X	X	X
Cunder 14				X	X	X
Largest no. in yr.	8	49	51	X	X	X

## SUMMARY REPORT AND CERTIFICATE OF INSPECTOR.

This is to certify that on careful inspection of the factory workrooms, conditions were found to be in substantial compliance with the law and Industrial Code rules, relative to subjects enumerated below, except where indicated in the negative, supplemented by orders on back of card.

Employment and hours of labor of children—Male minors—Women Yes. §8-A Yes.

Health—Comfort—Ventilation—Sanitary conditions and conveniences No.

Guarding switchboards—Elevators—Machinery—Inspection of boilers No.

Work rooms: Lighting—Maintenance—Occupancy—Exits—Fire prevention Yes.

Rules: Special to foundries.....Special to milling industry.

Posting: Laws—Rules—Schedules—Notices—Certificates—Permits No Meal time Yes Wages Yes.

Ten.—Factory—No. hor. exits 0 No. exit stairs 2 (594)

No. fire escapes 0 — No. elevators 2.  
(Rule 390.)

Proprietors at work 0 Work in 1 shifts  
Work nights? No. at work 37 On Sunday? 0 No. at work —

4/17/16 ROSE RICHARDS,  
Date of inspection. Factory inspector.

[Form 5 (reverse). See p. 81.]

## Orders:

Post laws and hours of labor. Compiled.

Prohibit the use of towels in common.

Provide a dressing room for the use of females, such room to have at least one window opening to the outer air and to be inclosed by means of solid partitions or walls and to contain at least sixty (60) square feet for the first ten (10) persons and an additional two (2) square feet for each person in excess of ten (10).

Provide at least two couches or beds in your factory for the use of females.

Whitewash walls of water-closet compartments used by males.

Orders on building card to owner.

Examined by G. G. H. 4/27/16. Notice sent 4/29/16.  
Date. Occ.—L. D.—C. L.—S. R.—I. H.—C. Card filed.

 Name John Doe Co.  
 Address 285 Elm St., N. Y. C.

[Form 6. See p. 81.]

		Insp. No. .... Supv. Dist. ....	
		C. L.	S. I. ....
		Purpose of visit (if special).	
Name <i>American Candy Co.</i>	Address <i>New York City.</i>	County.	
Or business title of firm or corporation.	City or village.		
Name and address <i>John Bruce.</i>	<i>Superintendent.</i>	<i>Dec. 6, 1914.</i>	
Of person directly responsible for hiring children.	Relation to business.	Date of inspection.	
Children under 14 years or without certificates.			
Name and address.	Place of birth.	Date of birth.	Work engaged in.
<i>Bessie Jennings.</i>	<i>Jersey City, N. J.</i>	<i>Nov. 4, 1901.</i>	<i>Packing.</i>
Statement of Inspector. <i>Child stated she told employer she was over 16; child is small.</i>			

A. J. GREEN, Inspector.

Children alleged to be over 16 but apparently under 16, employed without certificate.

Name and address.	Place of birth.	Alleged date of birth.	Work engaged in.
<i>James Lawson.</i>	<i>N. Y. City.</i>	<i>Mar. 4, 1898.</i>	<i>Cleaning.</i>
A. J. GREEN, Inspector.			

Date notice mailed. Person mailing. Time. Place mailed. Evidence received. Examined by.

[Form 6 (reverse). See p. 81.]

[Both sides of this form are never used at the same time.]

		Insp. No. 127. Supv. Dist. 1-57.	
		I. H.	S. I. A. 368.
		Purpose of visit (if special).	
Name <i>Jones &amp; Smith.</i>	Address <i>145 Main St., N. Y.</i>	<i>N. Y.</i>	
Or business title of firm or corporation.	City or village.	County	
Name and address <i>John Jones.</i>	<i>Partner.</i>		
Of person directly responsible for fixing hours of labor of child.	Relation to business.		
Date of inspection <i>1/13/18.</i>	<i>5.30 p. m.</i>		
When child was found working illegal hours.	Hour and minute.		
Employed <i>over 8 hours daily—before 8 a. m.—</i>	<i>after 5 p. m.—</i>	<i>9</i>	
Name and address <i>Mary Brown, 68 Howe St., N. Y. C.</i>	<i>9</i>	<i>8 a. m. 6 p. m.</i>	
Of child found at work.	Daily hours.	Commence work.	Stop work.
<i>80 m.</i>			
Noonday recess.			
<i>I found Mary Brown, who will be 16 yrs. old Sept. 15, '16, employed at 5.30 p. m. cleaning chocolate pans.</i>			
Subsequent visit (within 48 hours, if violation was not clearly established at time of inspection).			
Date.	Hour and minute.	Violation continued.	Evidence secured.
Of reinvestigation.			
Person in authority seen.	Date referred to counsel.		
Remarks.			

A. J. GREEN,  
Inspector.Statement of counsel: *Prosecution begun.*

Report on children employed illegal hours.

Adolph Rutgers. *2/3/18.*  
Counsel. Date.

[New York City Form 1. See p. 23.]

Name *Belisario Mantilli.*  
 Address *229 E. 14th St.*  
 New York *Dec. 12, 1913.*  
 Application for an employment certificate.

DEPARTMENT OF HEALTH  
BUREAU OF CHILD HYGIENE

Passport.

[On margin:]  
M 43837.

7a.

[New York City Form 2. See p. 23.]

DEPARTMENT OF HEALTH,  
OF THE CITY OF NEW YORK,  
DIVISION OF CHILD HYGIENE.

STATE OF NEW YORK,  
CITY OF NEW YORK, }  
COUNTY OF Queens } ss:

*Marie Klein*, being duly sworn, deposes and says that she resides at No. 47 *Stockholm* Street, New York City, and is the parent of *Mary Klein*, that she is unable to accompany said child to the office of the Department of Health, and hereby authorizes *Anna Klein* to act as custodian of said child in obtaining her employment certificate.

*MARIE KLEIN.*

(Witnesses, if signature is by mark "X.")

.....  
Name of Witness.  
.....  
Address of Witness.  
.....  
Name of Witness.  
.....  
Address of Witness.

Subscribed and sworn to, before me,  
this 3rd day of April 1914 }  
[Seal.]

*AUGUST SELLARS,*  
Notary Public,  
#348 N. Y. County.

(If this affidavit is made by mark "X," there must be two witnesses to the mark "X," and each witness must sign his or her name and state his or her address directly beneath his or her name.)

[New York City Form 3. See p. 23.]

STATEMENT OF PERSON SIGNING APPLICATION FOR EMPLOYMENT CERTIFICATE.

I *Sarah Small* residing at 1245 *George St.*, *Manhattan* having been duly sworn, depose and say that in the case of *Harry James* applying for an employment certificate this day, his mother is dead and his father is in *Idaho* and that he is residing with me for the year.

I furthermore depose and say that under these circumstances, I am acting in the capacity as guardian of said *Harry James*.

Subscribed and sworn to, before me, this 12th day of March, 1915.

*J. V. MANN.*

[New York City Form 4. See p. 24.]

DEPARTMENT OF HEALTH,  
OF THE CITY OF NEW YORK,  
BUREAU OF RECORDS.

Borough of *Manhattan*.  
No. of certificate 17469.

This is to certify that

*John P. Wallace*

was born on Jan. 18, 1899, according to the records of this department.

*SHIRLEY W. WYNNNE, M. D.,*  
Assistant Registrar.

Mar. 26, 1914.

[New York City Form 5. See p. 24.]

DEPARTMENT OF HEALTH,  
THE CITY OF NEW YORK,  
BUREAU OF RECORDS.

Borough of *Manhattan*.

This is to certify that a search has been made of the records of birth of this borough and the name of *George A. Halley*, said to have been born Feb. 19, 1900, has not been found.

*SHIRLEY W. WYNNNE, M. D.,*  
Assistant Registrar.

April 4, 1914.

[New York City Form 6. See p. 24.]

## SCHOOL RECORD.

To the Board of Health of the Department of Health of the City of New York.

Gentlemen:

THIS IS TO CERTIFY THAT *George Kelley* of No. 4 *Madison St.*, has attended school No. *St. Agnes School* situated at No. 153 *E. 13 Street* in the Borough of *Man.*, City of New York, 140 days during the twelve months next preceding its fourteenth birthday (or next preceding its application for this school record); and that said child is able to read and write simple sentences in the English language, and has received during such period instruction in reading, spelling, writing, English grammar and geography, is familiar with the fundamental operations of arithmetic up to an including fractions, and has completed the work prescribed for the first six years of the public elementary schools, or school equivalent thereto, or parochial schools.

The school record gives the date of birth of said child as *Sept. 30, 1899*; name of parent (guardian or custodian) *John Kelley*.

Dated, *Mar. 4, 1914*.

SISTER MARY ANTOINETTE.

Signature of principal or chief executive officer of the school.

(The law requires the school record to be signed by the principal or chief executive officer of the school and it must be furnished to any child who after due examination and investigation may be entitled thereto. The school record must contain, among other things, a statement certifying that the child has regularly attended the public schools or schools equivalent thereto, or parochial schools, for not less than 130 days during the twelve months next preceding its fourteenth birthday, or during the twelve months next preceding its application for this school record.)

Section 384L of the Penal Code makes it a misdemeanor for any person to make a false statement in or in relation to any application for an employment certificate.)

THIS IS NOT A PERMIT TO WORK.

[New York City Form 7. See p. 24.]

DEPARTMENT OF EDUCATION,  
THE CITY OF NEW YORK.  
Borough of *Man.*

Date *May 19, 1914*.

To the Board of Health, the City of New York.

I HEREBY CERTIFY THAT *Charles Willey*, residing at 77 *Madison St.*, in the City of New York has attended—

P. S. No. 5	Dist. 7	Borough 160	days	Principal.
.....	Dist.....	Borough.....	days.....	Principal.
.....	Dist.....	Borough.....	days.....	Principal.
.....	Dist.....	Borough.....	days.....	Principal.

An aggregate of 160 days during the twelve months next preceding his fourteenth birthday, or during the twelve months next preceding the date of this certificate; that said child is able to read and write simple sentences in the English language and has received instruction during such period in reading, spelling, writing, English grammar, and geography, and is familiar with the fundamental operations of arithmetic up to and including fractions, and has completed the work prescribed for the first six years of the public elementary school or school equivalent thereto, or parochial school; and is in the 7A grade and furthermore, that said child, according to the records of above-named school, was born on *Jan. 10, 1899*, and that its parent, guardian, or custodian is *Henry Willey*.

MARY BRUCE  
Principal.

Results of academic examination conducted by district superintendent.

On *May 4, 1914*.

Arithmetic, B.  
English, C.  
(Written composition.)

Writing from dictation, C.  
Oral reading, B.

(Signed) MARY BRUCE.

Principal, P. S. No. 5.

Penal Law—Art. 120—Sec. 1275—Subd. 8.

"Any person who makes a false statement in or in any relation to any application made for an employment certificate as to any matter required by Articles 6 and 11 of the Labor Law to appear in any affidavit, record, transcript, or certificate therein provided for, is guilty of a misdemeanor and upon conviction shall be punished for a first offense by a fine of not less than twenty nor more than fifty dollars; for a second offense by a fine of not less than fifty nor more than two hundred dollars, or by imprisonment for not more than thirty days, or by both such fine and imprisonment; for a third offense by a fine of not less than two hundred and fifty dollars, or by imprisonment for not more than sixty days, or by both such fine and imprisonment."

NOTE.—This is a certificate of school attendance only. A permit to work must be obtained from the board of health.

A school certificate must not be issued to any child under fourteen years of age, or in any grade lower than 7A (seventh year, first half.)

[New York City Form 8. See p. 25.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
BOROUGH OF MANHATTAN, 149 CENTRE STREET.

## APPLICATION AND AFFIDAVIT FOR EMPLOYMENT CERTIFICATE.

STATE OF NEW YORK, CITY OF NEW YORK, COUNTY OF N. Y. ss.:

*Abraham Goldstein* being duly sworn, deposes and says: That he is the applicant above named, and resides at No. 123 E. 20th St., in the City of New York, Borough of Man.; that deponent is the parent, guardian, custodian of *Isidore Goldstein* and hereby makes application for an employment certificate

Name of child.

to be issued in the name of said child; that the said child was born at *Russia* in ..... on the 10th day of *Aug.* in the year 1889 and is 15 years of age.

Deponent further says that he is informed by the officer to whom this application is made for an employment certificate, that the evidence of age of said child must be presented in the following order, namely, (a) birth certificate; (b) certificate of graduation; (c) passport or baptismal certificate; (d) other documentary evidence; (e) physicians' certificates.

And deponent further says that the paper now produced for filing in the Department of Health of the City of New York, is the *transcript of birth record* of the said child; and that the child who is named in the said paper as *Isidore Goldstein* is the child now appearing with me, whose true name is ..... and for whom deponent makes the application aforesaid, and no evidence of age specified in any of the preceding subdivisions of the law, as above set forth, can be produced.

Sworn to before me this 22 day of *Sept.*, 1914.

ABRAHAM GOLDSTEIN,  
Signature of parent, guardian, custodian.  
ISIDORE GOLDSTEIN,  
Signature of child.

JOHN J. O'BRIEN.  
Signature of officer issuing the certificate.

## STATEMENT OF A MEDICAL OFFICER OF THE DEPARTMENT OF HEALTH.

I hereby certify that *Isidore Goldstein*, the above-named child, has ..... in my opinion, reached the normal development of a child of its age, and is ..... in sound health and is ..... physically able to perform the work which it intends to do.

WM. T. GARDNER, M. D.  
Signature of a medical officer of the board of health.

## STATEMENT OF OFFICER ISSUING THE CERTIFICATE.

I hereby certify—

1. That the following papers relating to the above-named child have been filed in this office:

(a) Its school record, filled out and signed, as required by law.

(b) *Transcript of birth record* (Its transcript of birth record, certificate of graduation, passport or baptismal certificate, other documentary evidence or physicians' certificate).

(c) Affidavit and application of the parent, guardian, or custodian of the child, showing the place and date of its birth.

2. That said child has appeared before me and has been examined and that said child is able to read and legibly write simple sentences in the English language, and is, in my opinion, 14 years of age or upwards.

3. That said child has ..... in my opinion, reached the normal development of a child of its age, and is ..... in sound health and is ..... physically able to perform the work which it intends to do, as appears by the statement of the examining physician.

JOHN J. O'BRIEN,  
Signature of officer issuing the certificate.

[New York City Form 8 (reverse). See p. 25.]

Application No. 7043.  
Name of child, *Isidore Goldstein*.  
Address, 123 E. 20th St.  
Date of birth, *Aug. 10, 1889*.  
Place of birth, *Russia*.  
Color of hair, *Black*.  
Color of eyes, *Black*.  
Height, 5 ft. 5-3/4 in.  
Weight, 102 lbs.  
Color, *White*.  
Mother tongue, *Hebrew*.  
Birthplace of father, *Russia*.  
Distinguishing characteristics:

.....  
.....

## [New York City Form 9. See p. 25.]

Name, *James Collins*. Address, *76 Monroe St.*Held for *Defective vision*.Date held, *May 10, 1915*.Treated for *Astigmatism*.Date treated, *May 20, 1915*.Treated by *Dr. Philip Snow*.Final disposition, *Certificate granted*.

Remarks: .....

WM. T. GARDNER.  
Medical Inspector.

## CASES TEMPORARILY WITHHELD.

Bureau of child hygiene.

Division of employment certificates.

## [New York City, Form 10. See p. 26.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
SANITARY BUREAU, DIVISION OF CHILD HYGIENE.

BOROUGH OF *Manhattan*,  
NEW YORK, *Mar. 27, 1914*.

Mrs. *Levy*.

SIR: You are informed that your application made for an employment certificate for *Sol Levy* can not be granted on account of *physical incapacity*.

Respectfully,

S. JOSEPHINE BAKER, M. D.,  
Director of the Bureau of Child Hygiene.

## [New York City, Form 11. See p. 26.]

Name, *De Pina Luje*.Residence, *48 Driggs Ave.*

Refusal No.  
*1287*.

## REFUSED.

Date of refusal, *2/27/14*.

## CAUSE OF REFUSAL.

*Malnutrition.*

## [New York City Form 12. See p. 27.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
SIXTH AVENUE AND 55TH STREET,  
SANITARY BUREAU, DIVISION OF CHILD HYGIENE,  
NEW YORK, *Mar. 28, 1914*.

To the Board of Health:

Gentlemen:

In the following case it appears to my satisfaction that

*August Mathews*,

residing at *463 Columbus Ave.*, in the Borough of *Manhattan*, City of New York, the child for whom an employment certificate is requested, and who has presented a school record, is in fact over fourteen years of age; that satisfactory documentary evidence of age can be produced which does not fall within any of the provisions of the subdivisions preceding subdivision (d), of sections 71 and 163 of chapter 291 of the laws of 1907, and that none of the papers mentioned in said preceding subdivisions can be produced, and I therefore present to the board of health, for its action, this statement signed by me showing such facts, and I also submit the following affidavits and papers which have been produced before me constituting evidence of age of such child, viz:

*Census record.*

Respectfully submitted.

MARY TAYLOR,  
Medical Examiner.  
Clerk.

(The board may, by resolution, provide that such evidence shall be entered on the minutes of the board, and shall be received as sufficient evidence of the age of such child for the purposes of this section.)

[New York City Form 13 (reverse). See p. 27.]

DEPARTMENT OF HEALTH,  
SANITARY BUREAU,  
DIVISION OF CHILD HYGIENE.

NEW YORK, Mar. 26, 1914.

MARY TAYLOR,  
Medical Examiner,  
Clerk.

Evidence of age of  
August Mathews.

DEPARTMENT OF HEALTH,  
SANITARY BUREAU,  
DIVISION OF CHILD HYGIENE,  
THE CITY OF NEW YORK.

NEW YORK, Mar. 26, 1914.

Respectfully forwarded.

August Mathews

of 408 Columbus Ave., an applicant for certificate of employment is unable to furnish a birth certificate, a certificate of graduation, passport, or a baptismal certificate, as evidence of age, and does present other documentary evidence that he is fourteen years of age or upwards, viz:

He presents a certificate from *Perr. Cn. Bd.* in which it is stated that according to their records dated 5/27/10 he was born on Sept. 15, 1898 (was then ~~11~~ <sup>10</sup> years ~~10~~ <sup>11</sup> months old).

He is shown by his school record to be 15 years and 6 months old, and as he is unable to further produce the evidence of age otherwise required, and presents the above documentary evidence, I would respectfully recommend that a certificate of employment be granted to August Mathews.

Borough Chief, Division of Child Hygiene.  
Borough of Manhattan.

NEW YORK, ....., 19  
Approved and respectfully forwarded to the sanitary superintendent.

Chief, Division of Child Hygiene.

SANITARY BUREAU.

NEW YORK, ....., 19  
Approved and respectfully forwarded to the board.

Sanitary Superintendent.

SANITARY BUREAU.

NEW YORK, ....., 19

Respectfully referred to the chief, division of child hygiene, with instructions to issue a certificate of employment to the within applicant.  
By order of the sanitary superintendent.

..... Clerk.

DEPARTMENT OF HEALTH,  
SANITARY BUREAU,  
DIVISION OF CHILD HYGIENE.

NEW YORK, ....., 19

Referred to mercantile office, with instructions to have a certificate of employment issued to applicant.  
By order of the chief of division.

..... Clerk.

[New York City Form 13. See p. 27.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
Borough of *Manhattan*.

APPLICATION FOR EMPLOYMENT CERTIFICATE AND FOR PHYSICIANS' CERTIFICATE OF AGE.

NEW YORK, *Sept. 25, 1913.*

To the Board of Health, City of New York:

GENTLEMEN:

I, the undersigned, hereby make application for an employment certificate under the provisions of the labor law of the State of New York, to be issued to and in the name of

*Ida Goldmark,*the child of which I am the *mother*, and who resides at *653 Fifth Street*, in the City of New York, Borough of *Manhattan*; and I hereby further make application for physicians' certificates.*IDA GOLDMARK,*  
Signature of child.*Her*  
*X CELIA GOLDMARK.*  
*mark.* Signature of parent.

AFFIDAVIT.

STATE OF NEW YORK,

CITY OF NEW YORK, COUNTY OF *N. Y.* ss.:*Celia Goldmark*, being duly sworn, deposes and says:That *she* is the applicant above named and resides at No. *653 Fifth Street*, in the City of New York, Borough of *Manhattan*.Deponent is the parent *mother* of the child above named.

That deponent asks for the issuance of physicians' certificates on which, together with a school record, an employment certificate may be issued in accordance with the labor law of the State of New York.

*Her*  
*X CELIA GOLDMARK.*  
*mark.*Sworn to before me this *25* day of *September 1913.**MARY TAYLOR.*  
Signature of officer issuing certificate.

I hereby certify that the child above named was produced before me and is apparently at least fourteen years of age, and I hereby receive the foregoing application for physicians' certificates and file the same this date.

Dated New York, *Sept. 25, 1913.**MARY TAYLOR.*

Not less than ninety days having elapsed since the date of the filing of this application for physicians' certificates, and no facts appearing within such period nor after an examination of the statements contained in said application tending to discredit or contradict any material statement of such application, I hereby direct the child named in said application to appear for physical examination before two physicians designated by the board of health.

Dated New York, *Mar. 26, 1914.**JOHN J. O'BRIEN.*We, *Wm. T. Gardner, M. D., and J. L. Blumenthal, M. D.*, physicians officially designated by the board of health, hereby certify that ..... the child named in the within application, appeared this day before us for physical examination; and we hereby severally further certify that we have separately examined such child, and that in our opinion, the said child is at least fourteen years of age.*WM. T. GARDNER, M. D.*  
*J. L. BLUMENTHAL, M. D.*

(In case the opinions of such physicians do not concur, the child shall be examined by a third physician and the concurring opinion shall be conclusive for the purpose of the law as to the age of the child.)

Deponent further says that the said child is *16+* years of age; that *she* was born at *Russia* on the *14* day of *August, 1898*, and that the present residence of said child is *653 Fifth St.,* in the Borough of *Manhattan,* City of New York.This deponent, your petitioner for physicians' certificates, also alleges that *she* is unable to produce any of the evidence of age of said child above mentioned, specified in sections 71 and 163 of the labor law of the State of New York, namely:

- (a) Birth certificate;
- (b) Certificate of graduation;
- (c) Passport or baptismal certificate;
- (d) Other documentary evidence.

That the following facts are presented for the consideration of the officer to whom application is made for the issuance of an employment certificate, to assist in determining the age of said child, namely:

*Goldmark.*Application No. *2369.*

PHYSICIANS' CERTIFICATE.

*Sept. 25, 1913.*  
*Dec. 25, 1913.*  
*Notified 3/24/1914.*



[New York City Form 14. See p. 32.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
DIVISION OF CHILD HYGIENE,  
NEW YORK, March 15, 1914.

I, *Harry K. Fellows*, an applicant for duplicate employment certificate, hereby state: That employment certificate No. 7023 issued by the Department of Health of the City of New York on the tenth day of March, 1914, has been lost in the following manner: *Fell out of a book on my way home*, and, after making a diligent search I have been unable to find same.

I therefore request that a duplicate certificate be issued.

(Signature) *HARRY K. FELLOWS*,  
(Address) *145 West 80th St.*

[New York City Form 15. See p. 33.]

DEPARTMENT OF HEALTH, CITY OF NEW YORK,  
BUREAU OF CHILD HYGIENE,

EUGENE W. SCHEFFER, Secretary.

Date Dec. 7, 1913.

This is to certify that the department of health has investigated the proof of age of

*John Smith*,  
who resides at *425 Spruce St.*,

and whose signature is hereto affixed, and is satisfied that the said minor is over sixteen years of age, and therefore entitled to work without an employment certificate.

This application for an employment certificate is hereby refused, as the applicant is over age.

The department of health will not issue duplicates of this paper.

*MARY L. MORRISON*,  
Chief, Division of Employment Certificates.  
*JOHN SMITH*,  
(Signature of child.)  
*S. J. BAKER*,  
Director, Bureau of Child Hygiene.

[New York City Form 16. See p. 36.]

DEPARTMENT OF HEALTH,  
THE CITY OF NEW YORK.

I, the undersigned, hereby certify that the information noted below is a correct copy of the facts contained in a certain *birth certificate* presented as documentary evidence of age of the child whose name appears thereon. (birth certificate passport)

Name of child, *Rose Pokrivsky*.  
Date of birth or age given, *Nov. 14, 1899*.  
Name of father, *Levi Pokrivsky*.  
Name of mother, *Sarah Pokrivsky*.  
Birthplace, *Austria*.

(Signed) *JOHN O'BRIEN*,  
(Officer issuing paper.)

Copy or translation made by *J. V. Madison*.  
Original returned to *ROSE POKRIVSKY*.  
(Signature of child.)

*JACOB SOBEL*, M. D.,  
Borough Chief.

Date *May 3, 1914*.

[New York City Form 17. See p. 37.]

DEPARTMENT OF HEALTH, THE CITY OF NEW YORK,  
DIVISION OF CHILD HYGIENE.

I, the undersigned, hereby certify that a certain diploma bearing date *Jan. 29, 1914*, was this day presented and exhibited to the department of health of the City of New York to aid in securing an employment certificate under the provisions of the labor law of the State of New York and in lieu of the school record required by said law. That said diploma was issued to and bears the name of *Ida Goddard*; that said diploma was issued by *Dept. of Educ.* (Public School No. 15), situated in the City of New York, Borough of *Man.*, and certifies, among other things, that said child has satisfactorily completed the course for elementary schools.

*JACOB SOBEL*, M. D.,  
Chief of the Division.

New York, *Mar. 25, 1914*.

46446°—17—10

[New York City Form 18. See p. 38.]

NEW YORK, Mar. 27, 1914.

To the Board of Health.

GENTLEMEN:

I hereby certify that, according to the records of the church or congregation of  
*Church of Our Lady of Loretto,*  
 (Corporate name of church.)

situated at 303 Elizabeth St.

*Messina Blandino* was born at N. Y. C. on *September 26, 1899*, was baptized at said church  
 (Child's full name.) (Place of birth.) (Date of birth.)  
*Oct. 29, 1899*, and that she was *1 month* of age at that date.  
 (Date of baptism.)

(Signed) *ENRICO C. LUIGI,*  
 Minister.  
*Church of Our Lady of Loretto,*  
 Church.  
*JACOB SOBEL, M. D.*

[Place seal here.]

[New York City Form 19. See p. 39.]

CITY OF NEW YORK, STATE OF NEW YORK, COUNTY OF NEW YORK, ss:

*Max Mushnitsky*, being duly sworn, deposes and says: That on the *1st day of March, 1913*, deponent was the *rabbi* of the congregation situated at *228 Christopher Ave., Brooklyn*, and that on said date *Leon Spiceman* was Barmitzvah at the synagogue of the above-mentioned congregation.

Deponent further states that he was present on said date, at which time said *Leon Spiceman* began to lay the phylacteries according to Jewish rites. That a record was made in the said congregation of the date when the said boy was Barmitzvah as aforesaid and the date, according to said records, is *March 1, 1913*, and that no boy can be Barmitzvah until he has reached thirteen years of age.

Sworn to before me this *27th* day of *March, 1914*.*MAX MUSHNITSKY.**DELIA JACOBSON.*

[Seal of Commissioner of deeds—Notary public, New York City, applied at foot of paper.]

[New York City Form 20. See p. 39.]

DEPARTMENT OF EDUCATION, THE CITY OF NEW YORK,  
 BUREAU OF ATTENDANCE, 154-156 EAST 68TH STREET.

CENSUS AGE CERTIFICATE.

Nov. 14, 1914.

This is to certify that according to the records of this office dated *Mar. 10, 1914*, *Basie Poland*, residing at that time at *11 Mulberry St., Man.*, was recorded by the census enumerator as follows:  
 Date of birth, *Jan. 4, 1900*.

*JOHN W. DAVIS,*  
 Director.

[New York City Form 21. See p. 55.]

EXAMINATIONS FOR SCHOOL RECORDS.

March 19, 1914.

Dictation:

"Here, Harold," I said, "is some money. Go buy yourself some more marbles, and when you have them, keep them to play with. But don't play for keeps; it is gambling, and the gambler deserves to lose."

Bill:

Mrs. White bought of Blank & Company 14 yards silk at \$2 1/2 per yard, 6 doz. rolls tape at 45¢ a dozen, 6 waists at \$2 1/3 each, 16 bolts ribbon at 12 1/2¢ each. Make out a receipted bill for same.

Arithmetic:

1. A chest containing 62 5/16 pounds was found to hold 12 1/4 pounds spoiled tea. How many pounds of good tea were there left?

2. What is the cost of 25 bushels of wheat at 81 1/2¢ a bushel?

3. A ship sails 7,812 miles in 36 days. How far does it sail in one day?

Reading:

Fourth year. Character Building Reader. "The Boy Who Tried." Page 36.

March 5, 1914.

Dictation:

Long, long ago, a ship full of people was sailing across the ocean to this land. These people were called Pilgrims. Pilgrim means wanderer, and these people were wandering from place to place in search of a home where they could worship God as they thought right.

Bill:

Mr. James Blank bought of Thomas Smith 3 yards of lace at 65¢ a yard, 3 doz. handkerchiefs at \$4.75 a dozen, 44 yards silk at \$1.15 a yard, and a table cloth for \$8. Make out and receipt bill for the same.

Arithmetic:

1. A farmer had 275 sheep and sold 3/5 of them. How many had he left?

2. William is 11 3/4 years old and Thomas is 9 5/12 years old. How much older than Thomas is William?

3. At \$7.50 each how many barrels of flour can be bought for \$637?

Reading:

Heath's Fourth Reader. "The Three Giants." Page 18.

[Six took the examination of March 5th and passed.]

(Continued on opposite page.)

February 6, 1914.

Arithmetic:

1. If I place \$30 in a savings bank at 3 1/2% interest, how much interest will be due me at the end of 6 months?
2. Market prices are as follows: Round steak, 25¢ a pound; ham, 28¢ a pound; mutton, 24¢ a pound; veal chops, 29¢ a pound. Find amount of bill if you should buy 2 pounds of round steak, 1/2 lb. ham, 4 3/4 lb. mutton. Make a bill. Receipt it.
3. A man employed 80 girls in his factory. He had to reduce his force 15%. How many girls did he have to discharge?
4. A man had three pieces of muslin. One contained 6 1/2 yd., another 23 2/3 yd., and another 13 1/8 yd. He sold 17 3/4 yd. How many yards had he left?
5. I bought 65¢ worth of sugar. If sugar is worth 6 1/2¢ a pound, how many pounds should the grocer give me?
6. If a man earns \$13.50 a week, and saves one-fourth of the wages, how much does he save in a year?
7. Mental work.
  - (a) Tell time.
  - (b) Cost of 100 books at 13 1/2¢ each.
  - (c) Cost of 3 handkerchiefs if they are sold at 75¢ a half dozen?
  - (d) I spent \$2.16 and 73¢. How much change from a five-dollar bill?
  - (e) Sheffield milk is 9¢ a quart. The month's bill was \$2.70. How many quarts of milk had been bought?
8. Divide \$16,239.17 by 103.06.
9. Multiply \$13,655 by 33 2/3.
10. Add dictate:
 

\$107.39
870.93
82.16
1,217.61
24.03
69.97
513.80
76.44
500.17

Spelling:

citizens	permits	majority	manager
injure	Broadway	obedience	writing
millinery	punctuality	avored	pleasing
does	fifteenth	Chicago	to-day's paper
recommendation	mayor	superintendent	whose name is
intelligent			

Letter:

Write a business letter making an application for a position.

Dictation:

By teaching all, especially the children of America, to speak our common language; to understand and love liberty; to honor the flag; to respect the Government and to aid in strengthening and perfecting our laws and institutions.

The pride of a nation is in its children and youth. Its hope and security are in their intelligence, morality and patriotism.

Reading:

Baker and Carpenter Sixth Year Language Reader.



[New York City Form 22 (reverse). See p. 56.]

## PHYSICAL RECORD.

Name, *Hamilton, Max*. Born, *9/31/00*.  
 Nationality of father, *English*. Mother, *Italian*. Number in family, adults *5*, children *15*, *97* *4b*.  
 Number of birth *7*. History of measles, *No*. Scarlet fever, *No*. Diphtheria, *Yes*. Pertussis, *No*. Pneumonia, *No*. Grippe, *No*.  
 Date of 1st examination, *12/8/06*. In school, *15*.

1. School year.....		1		2		3		4		5		6		7		8		9	
1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
2. Term.....																			
3. Class.....																			
4. Revaccinations.....																			
5. Diseases during term.....																			
6. Date of physical examinations.....																			
7. Defective vision.....																			
8. Defective hearing.....																			
9. Defective nasal breathing.....																			
10. Hypertrophied tonsils.....																			
11. Tubercular lymph nodes.....																			
12. Pulmonary disease.....																			
13. Cardiac disease.....																			
14. Chorea.....																			
15. Orthopedic defect.....																			
16. Malnutrition.....																			
17. Defective teeth.....																			
18. Defective palate.....																			
19. Height.....																			
20. Weight.....																			
21. Mentality.....																			
22. Effort.....																			
23. Proficiency.....																			

*Teeth. Personal extraction. Mouth hygiene.*  
*Glasses.*

[New York City Form 23. See p. 67.]

Department of Education.

Original.

Bureau of Attendance.

## REPORT OF POLICE OFFICER ON CHILD FOUND ON STREET DURING SCHOOL HOURS.

1. Family name of child. <i>Kappo,</i> Given name. <i>Maurice.</i>		Born month. <i>1</i> Day. <i>27</i> Year. <i>'08</i>		Boy. <i>✓</i>	Girl.
2. Family name of parent or guardian. <i>Kappo.</i>		Father's given name. <i>Salus.</i>		Mother's. <i>Mary.</i>	
3. Residence. Number. <i>242</i>	Street. <i>Monroe.</i>	Borough. <i>M</i>	Front.	Rear. <i>✓</i>	Floor. <i>4</i>
4. Where found. <i>Wall and Chilton Sts.</i>				Apt. No.	
5. Hour. <i>9.55 a. m.</i>				Block number.	
6. Return, <i>114 M</i>		W. 6543.		Consecutive office number.	
7. Returned to public school. <i>4-24-16</i>		Patrolman.		<i>78440</i>	
8. Disposition. <i>Mo. Da. Yr.</i>		Emma Black.		District ass'gnm't number.	
9. <i>2 B<sup>2</sup> 4-26-16-1.30 McDuffy.</i>		Principal.		Date received.	
10. <i>Truant. Likes to move around business district.</i>				Date referred.	
11. <i>Returned by mother to school 4/28/16. McDuffy.</i>				Date received.	
12. <i>Family unbroken.</i>				Date referred.	
				Date reported.	



3.

[New York City Form 25. See p. 71.]

Permanent Census Board.

EMPLOYMENT RECORD.

The City of New York.

Number.	Street.	Floor.	Number.	Street.	Floor.	Number.	Street.	Floor.
543	Main St.		4			71		
1. Child—Last name of.		John.		Nor mal		M-1603		May
First position.		Second position.		Third position.		Fourth position.		Fifth position.
J. P. Smith Co.		R. W. Brown Co.						
Employer.		Employer.		Employer.		Employer.		Employer.
Johnson & West St.		Pearl & Front St.		Place of business.		Place of business.		Place of business.
Place of business.		Place of business.		Place of business.		Place of business.		Place of business.
Clark, mail order house.		Clark, statistical office.		Occupation.		Occupation.		Occupation.
Occupation.		Occupation.		Occupation.		Occupation.		Occupation.
5/16/15		9/19/15.		Date taken—Date given up.		Date taken—Date given up.		Date taken—Date given up.
Date taken—Date given up.		Date taken—Date given up.		Date taken—Date given up.		Date taken—Date given up.		Date taken—Date given up.
Advertisement.								
How obtained.								
Didn't like work.								
Why given up.								
Paid Mo. Da. Place								
9. by Wk. Hr. work.								
\$5.00								
10. Average weekly wages.								
Two weeks.								
Time idle at this position.								
None.								
12. What chance for promotion.								

School

[New York City Form 25 (reverse). See p. 71.]

Permanent Census Board.

EMPLOYMENT RECORD.

The City of New York.

Date canvassed.	Time or block No.	Name of officer.	Sixth position.	Seventh position.	Eighth position.
4/25/16	1.05	L. W. White.	Employer. Place of business. Occupation. Date taken—Date given up.	Employer. Place of business. Occupation. Date taken—Date given up.	Employer. Place of business. Occupation. Date taken—Date given up.





[New York City Form 27. See p. 71.]

Department of Education.

Bureau of Attendance.

## PATROLMAN'S REPORT ON FAMILY'S CHANGE OF RESIDENCE.

Number.	Street.	Floor.	Apt. No.
Place from which removed, 17.....	W. 11th.....	3	308
Place to which removed, 25.....	E. 17th.....	5	517

Family name of father or mother.	Given name.	Number children under 16.	Given names of children.
Schultz.....	Sara.....	3	Henry, Mary, Frederick.

The foregoing information was obtained at the first address /.....  
 " " " " " " " " second address.....

Precinct.	Mo. da. yr.	Shield No.	Patrolman's signature.
5	3/7/15	317	Michael Doyle.

[New York City Form 28. See p. 75.]

(A copy of this form is sent daily to the compulsory attendance department.)

DEPARTMENT OF HEALTH,  
THE CITY OF NEW YORK.

TO THE COMMISSIONER OF LABOR.

Sir: In compliance with the requirements of the labor law you are hereby notified that the department of health has issued the following employment certificates during the month of April 1916.

Borough of Manhattan.

No. of certificate.	Date of issue.		Names.	Residence.		School record.	Issued by public school.	Date of birth.
	Month.	Day.		No.	Street.			
			Grade.					
M 4968	Apr.	1	Brown, Harold.....	11	Maple.....	19	Bk.	July 21/'01.
M 4969	"	"	Jones, Mary.....	22	Birch.....		39	Apr. 14/'00.
M 4970	"	"	Smith, John.....	33	Elm.....	16	89	Nov. 30/'00.
M 4971	"	"	White, Dora.....	44	Evergreen.....		87	Feb. 16/'08.
M 4972	"	"	Block, Max.....	55	Poplar.....	1	77	Feb. 23/'01.
M 4973	"	"	Green, Nora.....	66	Spruce.....		90	Oct. 4/'01.
M 4974	"	"	Holstein, Celis.....	77	Walnut.....		Par.	Nov. 9/'00.
M 4975	"	"	Levsky, Ella.....	88	Pine.....		68	Jan. 10/'08.
M 4976	"	"	Murphy, Louis.....	99	Willow.....		Par.	May 7/'01.
M 4977	"	"	Steinhaus, Rachel.....	187	Hickory.....		68	Sept. 23/'00.
M 4978	"	"	Paratin, Anna.....	298	Redwood.....		56	Dec. 23/'01.



[New York City Form 32. See p. 76.]

DEPARTMENT OF HEALTH, CITY OF NEW YORK,  
BUREAU OF CHILD HYGIENE, DIVISION OF EMPLOYMENT CERTIFICATES,  
Borough of *Manhattan*,  
NEW YORK, *April 24, 1916.*

To the Borough Chief.

SIR: I have the honor to submit the following report in relation to the issuance of employment certificates during the week ending *April 22, 1916.*

## Summary of action taken on employment certificates.

Applications pending beginning of week.....	125	
New applications received.....	113	
		238
Employment certificates granted.....	196	
Employment certificates refused.....	18	
Applications made pending.....	94	
		238
Duplicates.....		19

## Employment certificates refused.

Insufficient tuition.....		
Insufficient education.....		
Under age.....	2	
Over age.....	3	
Physical incapacity.....	13	
		18
Malnutrition.....	3	
Cardiac.....	1	
Pulmonary.....		
Miscellaneous.....	9	

## Applications temporarily withheld.

Number previously withheld.....	80	
New cases.....	9	
		89
Certificates granted.....	21	
Cases otherwise terminated.....	9	
Cases now pending.....	59	
		89

## Physical examinations.

Number examined.....		101
Defective teeth only.....		9
Defective associated.....		107
Defective vision.....	28	
Acute eye diseases.....	0	
Defective hearing.....	2	
Teeth.....	25	
Cardiac.....	1	
Pulmonary.....	0	
Mouth breathing.....	7	
Hypertrophied tonsils.....	13	
Palate.....	0	
Glands.....	24	
Anemia.....	1	
Malnutrition.....	3	
Hernia.....	0	
Nervous diseases.....	0	
Skin.....	0	
Goitre.....	2	
Orthopedic.....	1	
		107

Respectfully submitted.

JOHN J. O'BRIEN,  
Issuing officer  
KATHERINE E. MARYSON,  
Medical examiner.

No. 76.

[Buffalo Form 1. See p. 28.]

DEPARTMENT OF HEALTH; BUFFALO—APPLICATION FOR EMPLOYMENT CERTIFICATE OF CHILD BETWEEN THE AGES OF 14 AND 16 YEARS IN MANUFACTURING, MERCANTILE, AND OTHER ESTABLISHMENTS.

To the Department of Health, Buffalo, N. Y.

Application is hereby made for an employment certificate for *Elsie Samuels*.

Signature of child.

*PAULINE SAMUELS*,

Signature of parent or guardian or custodian.

Address, *346 Davey St.*

School record of *Elsie Samuels*.

According to the laws of 1903 the principal or chief executive officer of the school which such child attended shall furnish, on demand, a certificate containing the following facts:

To the Department of Health of the City of Buffalo, N. Y.

GENTLEMEN: I, the undersigned, the principal (or chief executive officer) of the public school No. 43, situated at No. *Lowjoy & Gold St.*, in the city of Buffalo, do hereby certify that *Elsie Samuels*, the child hereinafter referred to, has regularly attended the said school *one hundred and eighty-eight* days

(Write the number of days.)

during the twelve months next preceeding its fourteenth birthday (or next preceeding its application for this school record); and that said child is able to read and write simple sentences in the English language, and has received during such period instruction in reading, spelling, writing, English language and geography, and is familiar with the fundamental operations of arithmetic up to and including fractions, and has completed the work of the first six years of the public elementary school or school equivalent thereto or parochial school from which such school record is issued.

The said school record gives the date of birth of said child as *July 16, 1889*, residence, *346 Davey St.*; and the name of its parents (guardian or custodian) as *Herman Samuels*.

*FREDERICK W. FROST*,

Principal or chief executive officer of the school.

Dated, *June 25*.

(The law requires the school record to be signed by the principal or chief executive officer of the school and it must be furnished to any child who, after due examination and investigation, may be entitled thereto. The school record must contain, among other things, a statement certifying that the child has regularly attended the public schools or schools equivalent thereto, or parochial schools, for not less than 130 days during the twelve months next preceeding its fourteenth birthday, or during the twelve months next preceeding its application for this school record.)

(OVER)

[On the left margin:]

This is not a child-labor certificate and must not be accepted as such.

[Buffalo Form 1 (reverse). See p. 28.]

Filing No. *2443*.

Date, *9/3/14*.

I hereby certify that the within-named applicant personally appeared before me on this date, was examined, and complied with all legal requirements, and is entitled to an employment certificate.

*J. D. BALDWIN*,

Officer issuing the certificate.

[On the right margin, running down:]

Section 384, 1, 5, of the Penal Code as amended by chapter 507, Laws of 1907.

Any person who knowingly makes a false statement in or in relation to any application made for an employment certificate as to any matter required by articles 6 and 11 of the labor law to appear in any affidavit, record, transcript, or certificate therein provided for, is guilty of a misdemeanor, and upon conviction shall be punished for a first offense by a fine of not less than 20 nor more than 50 dollars; for a second offense, by a fine not less than 50 nor more than 200 dollars, or by imprisonment for not more than 30 days or by both such fine and imprisonment; for a third offense by a fine of not less than 250 dollars, or by imprisonment for not more than 60 days, or by both such fine and imprisonment.

[Buffalo Form 2. See p. 23.]

No. 85.

STATE OF NEW YORK, COUNTY OF ERIE, CITY OF BUFFALO, ss:

*Rose Jackson*, being duly sworn, deposes and says that she is the mother of *John Jackson*, the child for whom an employment certificate is desired; that the said child was born in *Rockness, N. Y.*, on the 3d day of *Aug., 1899*; but that it is impossible to produce any of the documentary evidence relative to the age of this child, as required by subdivision two of section 71, and section 163, chapter 518, laws of 1906, for the following reasons: *Birth is not recorded. (See letter.) Has no diploma and has not been baptized. Metropolitan Life Insurance Policy No. 33098, dated June 10, 1908, gives child's age at next birthday as 10 years, and this affidavit is, therefore, made in accordance with subdivision three of said section.*

ROSE JACKSON.

Subscribed and sworn to before me this 3rd day of *Sept., 1914*.

J. C. LYNCH.

To the Board of Health of Buffalo, N. Y.:

I hereby certify that I have investigated and examined all the facts and evidence submitted relative to the application of *John Jackson* for an employment certificate, and am satisfied that said child is entitled to such certificate, and, therefore, recommend that a certificate be granted.

J. C. LYNCH.

At a meeting of the Board of Health of Buffalo, N. Y., held on the 7th day of *Sept., 1914*, the following action was taken on the above application of *Rose Jackson* for employment certificate for *John Jackson*.  
Certificate granted.

AUGUST SAWYER,  
Secretary Board of Health.

[Buffalo Form 3. See p. 23.]

DEPARTMENT OF HEALTH,  
THE CITY OF BUFFALO, N. Y.

APPLICATION FOR EMPLOYMENT CERTIFICATE AND FOR PHYSICIANS' CERTIFICATE OF AGE.

BUFFALO, N. Y., *Aug. 1, 1914*.

To the Department of Health, City of Buffalo, N. Y.

GENTLEMEN:

I, the undersigned, hereby make application for an employment certificate under the provisions of the labor law of the State of New York, to be issued to and in the name of *John Jardine*, the child of which I am the mother, and who resides at *9 E. Balcom Street*, in the City of Buffalo, N. Y.; and I hereby further make application for physicians' certificates.

JOHN JARDINE,  
Signature of child.ROSE JARDINE,  
Signature of parent.

AFFIDAVIT.

STATE OF NEW YORK, COUNTY OF ERIE, ss:

*Rose Jardine*, being duly sworn, deposes and says:

That she is the applicant above named and resides at No. *9 E. Balcom Street*, in the City of Buffalo, N. Y.

Deponent is the parent mother of the child above named.

Deponent further says that the said child is *14* years of age; that he was born at *Amiens, France*, on the *18th* day of *July, 1900*, and that the present residence of said child is *9 E. Balcom St.*, Buffalo, N. Y.

This deponent, your petitioner for physicians' certificates, also alleges that she is unable to produce any of the evidence of age of said child above mentioned, specified in sections 71 and 163 of the labor law of the State of New York, namely:

- (a) Birth certificate;
- (b) Certificate of graduation;
- (c) Passport or baptismal certificate;
- (d) Other documentary evidence.

That the following facts are presented for the consideration of the officer to whom application is made for the issuance of an employment certificate, to assist in determining the age of said child, namely, *birth is not recorded. (See letter.) Has no diploma and has not been baptized; is not insured, and has no documentary evidence of any sort.*

[Buffalo Form 3 (reverse). See p. 23.]

That the school record filed herewith is the school record of the child above named, and deponent asks for the issuance of physicians' certificates on which, together with the said school record, an employment certificate may be issued in accordance with the labor law of the State of New York.

ROSE JARDINE.

Sworn to before me this 1st day of *Aug., 1914*.J. C. LYNCH,  
Signature of officer issuing certificate.

I hereby certify that the child above named was produced before me and is apparently at least fourteen years of age, and I hereby receive the foregoing application for physicians' certificates and file the same this date.

Dated Buffalo, N. Y., *Aug. 1, 1914*.

J. C. LYNCH.

Not less than ninety days having elapsed since the date of the filing of this application for physicians' certificates, and no facts appearing within such period nor after an examination of the statements contained in said application tending to discredit or contradict any material statement of such application,

I hereby direct the child named in said application to appear for physical examination before two physicians designated by the department of health.

Dated Buffalo, N. Y., Nov. 1, 1914.

J. C. LYNCH.

We, D. V. McClure, M. D., and J. A. Wahlz, M. D., physicians officially designated by the department of health, hereby certify that John Jardine, the child named in the within application, appeared this day before us for physical examination; and we hereby severally further certify that we have separately examined such child, and that in our opinion, the said child is at least fourteen years of age.

D. V. McCLURE, M. D.  
J. A. WAHLZ M. D.

(In case the opinions of such physicians do not concur, the child shall be examined by a third physician, and the concurring opinion shall be conclusive for the purpose of the law as to the age of the child.)

[Along right margin, below printed matter:]

Application No. 2003.

PHYSICIANS' CERTIFICATE.

[Buffalo Form 4. See p. 32.]

TRANSCRIPT OF LABOR CERTIFICATE.

No. of transcript, 1000.

BUFFALO, N. Y., Nov. 12, 1914:

No. of employment certificate .....

Fee, \$1.00.

STATE OF NEW YORK, COUNTY OF ERIE, CITY OF BUFFALO, ss.

Florence Price being duly sworn deposes and says that she is the mother of Rose Price; that said child had an employment certificate; that according to my information and belief, said employment certificate was destroyed in the following manner:

Placed in the bottom of clothes basket and was put in water.

Subscribed and sworn to before me this 12th day of Nov., 1915.

J. LYNCH,  
Officer issuing certificate.

[To right of stub:]

Fee, \$1.00.

TRANSCRIPT OF LABOR CERTIFICATE, DEPARTMENT OF HEALTH, BUFFALO, N. Y.

Nov. 12, 1914.

No. of transcript, 1000.

I HEREBY CERTIFY that the following is a true copy of the record of child labor certificate on file in the department of health of the city of Buffalo, N. Y., the original having been destroyed as per sworn statement filed this day.

FRANCIS E. FRONZAK, M. D.,  
Health Commissioner.

Attest:

This certificate is effective throughout the State and until the owner is 16 years of age unless sooner revoked.

No. EMPLOYMENT CERTIFICATE.

Issued pursuant to sections 71 and 163 of the labor law of the State of New York, chapter 36, Laws of 1909, as amended.

The department of health of Buffalo, N. Y., upon application duly made pursuant to law, grants this certificate to

Rose Price,  
(Name of child.)

and it is hereby certified that this child, who is described below, personally appeared before the undersigned official and was by him examined and found qualified for employment under the labor law; it is further certified that documentary evidence of the age and education of said child, as required by law, has been duly examined, approved, and made a part of the records of the above department, and that by careful examination the physical fitness of the said child has been determined by the medical examiner of the above department and that such physical examination has been recorded as required by law.

Description of child.

Place of birth, Buffalo, N. Y.  
Color of hair, Black.  
Height, 5 feet 2 inches.  
Distinguishing facial marks, Large mole.

Date of birth, Mar. 5, 1899.  
Color of eyes, Brown.  
Weight, 26.

ROSE PRICE,  
Signature of child named in the above certificate.

THE HEALTH COMMISSIONER,  
By J. LYNCH,  
Signature of official issuing certificate.  
Date Feb. 6, 1914.

N. B.—This certificate must be filed with the employer, and must be kept on file in the office at the place of employment during the period of such employment. It shall be surrendered to the child, its parent, guardian, or custodian upon the termination of the child's employment.

(OVER)

[Buffalo Form 4 (reverse). See p. 32.]

## IMPORTANT.

## NOTICE TO EMPLOYERS.

**FACTORIES:** In factories the child presenting this certificate shall not be permitted to work before 8 o'clock in the morning or after 5 o'clock in the afternoon, or for more than 8 hours in any one day or more than six days in any one week. (Section 77, Labor Law.)

Special attention is called to occupations at which children can not be employed, enumerated in section 83, Labor Law.

**MERCANTILE ESTABLISHMENTS:** In mercantile establishments the child presenting this certificate shall not be permitted to work before 8 o'clock in the morning or after 6 o'clock in the evening, or for more than 8 hours in any one day or more than six days in any one week. (Section 161, Labor Law.)

[Buffalo Form 5. See p. 71.]

Precinct.

Block.

## BUFFALO SCHOOL CENSUS.

Name, *Mary Kelley.* Sex, *Female.*  
 Month, day, and year of birth, *Mch. 15, 1909.* Address, *4 Prospect St.*  
 Birthplace, *Buffalo.* School, *No. 7.*  
 Defects, ..... Color, *White.*

Employed? *No.* Employer's name, .....

Labor cert.? .....

How many years working? .....

Can read and write English? *Yes.*Patrolman's shield No. *17.*

Leave this  
space blank.

Parent.

Name, *James Kelley.*Birthplace, *Ireland.*Years in U. S., *20.* Native language, *English.*

[Buffalo Form 6. See p. 72.]

Precinct, *5.*

## BUFFALO SCHOOL CENSUS.

Name, <i>Mary Kelley.</i>		Sex, <i>Female.</i> Color, <i>White.</i>	Parent's name, <i>James Kelley.</i>		
			Where born, <i>Ireland.</i>		Years in U. S., <i>20.</i>
Address, <i>4 Prospect St.</i>	School, <i>No. 7.</i>	Block, <i>94.</i>	Month, day, and year of birth, <i>Mch. 15, 1909.</i>	Where born, <i>Buffalo.</i>	Years in U. S., .....
Employer's name.		Employer's address.		Physical or mental defects, ..... Read or write English, <i>Yes.</i> Other, <i>No.</i>	
				Truant report.	Remarks.
Labor cert.	Enumerator, Shield No. <i>W. Brown. 17</i>				

[Buffalo Form 7. See p. 72.]

## BUFFALO SCHOOL CENSUS.

I have this *4th* day of *June* 1916, moved *Thomas Ryan* from *27 Williams Avenue* to *43 Highland Avenue Street.*

By order of  
*F. F. KLINCK,*  
*J. B. WALL,*  
 Police Commissioners.  
*M. REGAN,*  
 Supt. of Police.

*JOHN L. BOWERS,*  
 Owner.



[Buffalo Form 8. See p. 72.]

## BUFFALO SCHOOL CENSUS.

Name, *Jane Brown.* School, *7.*  
 Age, *14.* Address, *14 Prospect St.*  
 Parent's name, *James Brown.*  
 Remarks, .....  
 Date, .....

[Buffalo Form 9 (postal card). See p. 76.]

School No. *3.*Date, *April 16, 1915.*

The following person has been furnished to-day with attendance papers for the purpose of securing labor certificate:

Name, *Walter J. Blake.*Address, *3 Dustin Place.*Age, *14.* Day, month, and year of birth, *April 3, 1901.*Parent's name, *Samuel K. Blake.*

Remarks, .....

Grade, .....

*CORNELIUS PEARSON,*  
Principal.

[Buffalo Form 10. See p. 76.]

## BUFFALO SCHOOL CENSUS—CHILD-LABOR CERTIFICATE REPORT.

The following certificates were issued by the board of health during the week ending *June 7 1915.*

Child's name.	Address.	Age.	School.	Cert. No.
<i>Sarah Green.....</i>	<i>5 White St.....</i>	<i>14</i>	<i>No. 16.....</i>	<i>703</i>
<i>Charles Fowler.....</i>	<i>575 River St.....</i>	<i>16</i>	<i>" 3.....</i>	<i>704</i>
<i>Louis Poiriet.....</i>	<i>9 Riverside Ave.....</i>	<i>14</i>	<i>" 11.....</i>	<i>705</i>

Signed *WILLIAM B. DRAKE.*

[Rochester Form 1. See p. 41.]

## OFFICE OF THE BOARD OF HEALTH.

STATE OF NEW YORK, COUNTY OF MONROE, CITY OF ROCHESTER, SS.

*Mary Welch*, being duly sworn, says that she is the father, mother, guardian, duly appointed person having legal custody and control of *Fred Welch*, an infant; that said infant is aged *14* years; was born at *Rochester*, in the State of *New York*, on the *22* day of *October*, *1899*.

That deponent makes this affidavit for the purposes mentioned in section 2 of chapter 409 of the Laws of 1886, as amended by chapter 991 of the Laws of 1896, and section 3 of chapter 384 of the Laws of 1896, regulating the employment of women and children in manufacturing and mercantile establishments.

*MARY WELCH.*

Subscribed and sworn to this *17* day of *June* *1900*, before me.

*FLORENCE WEIS,*  
Commissioner of Deeds.

Extract from chapter 384 of Laws of 1896.

"It shall be unlawful for any notary public or other officer authorized and empowered by law to administer to any person an oath, to demand or receive a fee for taking or administering an oath, to a parent of, guardian of, or person in parental relation to any child as to the age of such child, where the affidavit thus taken is used or intended to be used for the purpose of obtaining a certificate as provided for in the foregoing section, from any board or department of health or health commissioner or commissioners as herein set forth."

[Stamped across face:]

This to certify that this child is 14 years of age or more.

46446°—17—11.

Leave this space blank.



No. 23.

[Rochester Form 3. See p. 73.]

Jan. 13, 1916.

SCHOOL CENSUS BOARD.

Name. <i>Wallace B. Scaggs.</i>		Nov. 7.	'01.	Girl.	Boy. In 7 n.
Address. <i>14 White St.</i>		Born Mo.	Day.	Year.	
Parent's name. <i>Horace L. Scaggs.</i>		Left <i>Peabody</i> School at the <i>6</i> Grade.			
Not attending.	Home N. W. C.	Unlawful absence.	Employed by <i>White &amp; Co.</i>		No. W. C.
<i>5 Wingate Lane.</i>		Employed by <i>Messenger.</i>		Degree.	
Employer's address. <i>Working without certificate.</i>		Kind of work of child.		Reported to	
Remarks. <i>Required to obtain certificate.</i>					
Disposition.					

Signed *ALLEN ROWLEY.*

No. 3.

[Rochester Form 4 (postal card). See p. 77.]

REPORT ON CHANGE OF ADDRESS WITHIN DISTRICT AND ISSUING SCHOOL RECORD.

ROCHESTER, N. Y., Jan. 15, 1916.

School No. *17.* Grade, *7.* Teacher, *Mary Tompkins.*  
 Name, *Susan Kennedy.*  
 New address.  
 Former address.  
 Date of birth, *February 16, 1900.*  
 Month. Day. Year.  
 Date school record issued, *Jan. 13, 1916.*  
 Pupil ~~will~~ (will not) remain in school.  
 N. B.—Send permanent record card to efficiency bureau if pupil obtaining school record leaves school.

[Utica Form 1. See p. 30.]

DEPARTMENT OF PUBLIC SAFETY,  
 CITY OF UTICA, N. Y.,  
 BUREAU OF HEALTH.

APPLICATION FOR EMPLOYMENT CERTIFICATE, MANUFACTURING, MERCANTILE, AND OTHER ESTABLISHMENTS  
 To the Health Officer, City of Utica.

Application is hereby made for an employment certificate for

*Mary Evans.*

Address, *80 Canal St.*

*MARY EVANS.*  
 Signature of child.

*LENA EVANS,*  
 Signature of parent, guardian, or custodian.  
 Address, *80 Canal St.*

AFFIDAVIT.

STATE OF NEW YORK, ONEIDA COUNTY, ss.

*Lena Evans*, being duly sworn, says that she is father, mother, guardian of *Mary Evans*; that the said *Mary Evans* was born at *Cadaria, N. Y.*, on the *16th* day of *February*, *1896*, and that she is *14* years of age.

*LENA EVANS.*

Sworn to before me this *18th* day of *June*, *1916.*

*CHAS. L. PRINGLE,*  
 Commissioner of Deeds in and for the City of Utica, N. Y.  
 [OVER]

[Utica Form 1 (reverse). See p. 30.]

STATEMENT OF OFFICER ISSUING THIS CERTIFICATE.

I hereby certify:

1. That the following papers relating to the above-named child have been filed in this office.
  - (a) Its school record filled out and signed as required by law.
  - (b) Affidavit (its passport or a transcript of its birth certificate or baptismal certificate or a religious record showing its date and place of birth.)
  - (c) Affidavit of the parent, guardian, or custodian of the child, showing the place and date of its birth. That said child has appeared before me and has been examined.

*CHAS. L. PRINGLE,*  
 Signature of officer issuing the certificate.

[Albany Form 1. See p. 62.]

OFFICE OF THE  
SUPERINTENDENT OF PUBLIC SCHOOLS,  
ALBANY, N. Y., April 1, 1914.To George W. Barrows,  
25 So. Main St.

Your attention is respectfully called to the following extract from the act of the Legislature of the State of New York, entitled "An act to provide for the compulsory education of children," passed May 12, 1894, as amended by chapter 140 of the Laws of 1910.

## EXTRACT FROM THE LAW.

§ 626. Unlawful employment of children and penalty therefor. It shall be unlawful for any person, firm, or corporation:

1. To employ<sup>1</sup> any child under 14 years of age, in any business or service whatever, for any part of the term during which the public schools of the district or city in which the child resides are in session.

2. To employ, elsewhere than in a city of the first class or a city of the second class, in a factory or mercantile establishment, business or telegraph office, restaurant, hotel, apartment house, or in the distribution or transmission of merchandise or messages, any child between 14 and 16 years of age who does not at the time of such employment present an employment certificate duly issued under the provisions of the labor law, or to employ any such child in any other capacity who does not at the time of such employment present a school-record certificate as provided in section 630 of this chapter.

3. To employ any child between 14 and 16 years of age in a city of the first class or a city of the second class who does not, at the time of such employment, present an employment certificate, duly issued under the provisions of the labor law.

§ 627. Employer must display record certificate and evening certificate. The employer of any child between 14 and 16 years of age in a city of the first class or a city of the second class shall keep and shall display in the place where such child is employed, the employment certificate and also his evening school certificate issued by the school authorities of said city or by an authorized representative of such school authorities, certifying that the said boy is regularly in attendance at an evening school of said city as provided in section 631 of this chapter.

§ 628. Punishment for unlawful employment of children. Any person, firm, or corporation, or any officer, manager, superintendent or employee acting therefor, who shall employ any child contrary to the provisions of section 626 hereof, shall be guilty of a misdemeanor, and the punishment therefor shall be for the first offense a fine of not less than \$20 nor more than \$50; for a second and each subsequent offense, a fine of not less than \$50 nor more than \$200.

Please record the names of all children between the ages of fourteen and sixteen years, employed in your establishment, on this paper, and mail the same to

C. EDWARD JONES,  
Superintendent of Public Schools, Albany, N. Y.<sup>1</sup> So in original.

Name.	Age.	Residence.	Employment certificate (yes or no).
Sarah Graham .....	15	10 North Ave. ....	Yes.
James Brewster .....	14½	131 Auburn St. ....	Yes.
Herman Schultz .....	15½	77 Arlington St. ....	Yes.
.....			

Respectfully submitted.

(Sign here) GEORGE W. BARROWS.

Albany Form 1 (reverse). See p. 62.]

Children employed

By

.....  
 ..... 191..

[Albany Form 2 (postal card). See p. 62.]

Evening School No. 5.

ALBANY, N. Y., Jan. 26, 1915.

Herman Schultz, reported as being in your employment, was absent from school last night. Your cooperation in the administration of the compulsory law relative to attendance at evening school is earnestly desired.

C. EDWARD JONES,  
Supt. Schools,  
W. JONES,  
Principal Evening School No. 5.

U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
JULY 1, 1910

# LIST OF REFERENCES OF CHILD LABOR

EDITED UNDER THE DIRECTION OF  
H. H. B. MEYER  
CHIEF, CHILD LABOR DIVISION, DEPARTMENT OF LABOR  
WITH THE ASSISTANCE OF  
LAURA A. THOMPSON  
LIBRARIAN, CHILDREN'S BUREAU

INDUSTRIAL SERIES NO. 1  
BUREAU OF LABOR, DEPT. OF LABOR



WASHINGTON  
GOVERNMENT PRINTING OFFICE  
1910

THE

PROGRESS OF

THE

ARTS AND

MANUFACTURES

IN

THE

UNITED STATES

OF AMERICA

FROM 1790 TO 1860

BY

JOHN R. HARRIS

OF THE

AMERICAN ANTHROPOLOGICAL ARCHIVES

NEW YORK

1860

U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU

JULIA C. LATHROP, Chief

LIST OF REFERENCES ON  
CHILD LABOR

COMPILED UNDER THE DIRECTION OF

H. H. B. MEYER

CHIEF BIBLIOGRAPHER, LIBRARY OF CONGRESS

WITH THE ASSISTANCE OF

LAURA A. THOMPSON

LIBRARIAN, CHILDREN'S BUREAU



INDUSTRIAL SERIES No. 3

Bureau Publication No. 18



WASHINGTON  
GOVERNMENT PRINTING OFFICE  
1916

## PUBLICATIONS OF THE CHILDREN'S BUREAU.

### Annual Reports:

- First Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1913. 20 pp. 1914.  
Second Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1914. 19 pp. 1914.  
Third Annual Report of the Chief, Children's Bureau, to the Secretary of Labor, for the fiscal year ended June 30, 1915. 26 pp. 1915.

### Care of Children Series:

- No. 1. Prenatal Care, by Mrs. Max West. 41 pp. 3d ed. 1913. Bureau publication No. 4.  
No. 2. Infant Care, by Mrs. Max West. 87 pp. 1914. Bureau publication No. 8.

### Dependent, Defective, and Delinquent Classes Series:

- No. 1. Laws Relating to Mothers' Pensions in the United States, Denmark, and New Zealand. 102 pp. 1914. Bureau publication No. 7.  
No. 2. Mental Defectives in the District of Columbia: A brief description of local conditions and the need for custodial care and training. 39 pp. 1915. Bureau publication No. 13.

### Infant Mortality Series:

- No. 1. Baby-saving Campaigns: A preliminary report on what American cities are doing to prevent infant mortality. 93 pp. 4th ed. 1914. Bureau publication No. 3.  
No. 2. New Zealand Society for the Health of Women and Children: An example of the methods of baby-saving work in small towns and rural districts. 19 pp. 1914. Bureau publication No. 6.  
No. 3. Infant Mortality: Results of a field study in Johnstown, Pa., based on births in one calendar year, by Emma Duke. 93 pp. and 9 pp. illus. 1915. Bureau publication No. 9.  
No. 4. Infant Mortality in Montclair, N. J.: A study of infant mortality in a suburban community. 36 pp. 1915. Bureau publication No. 11.  
No. 5. A Tabular Statement of Infant-Welfare Work by Public and Private Agencies in the United States. 114 pp. 1916. Bureau publication No. 16.

### Industrial Series:

- No. 1. Child Labor Legislation in the United States, by Helen L. Sumner and Ella A. Merritt. 1131 pp. 1915. Bureau publication No. 10.  
Analytical tables of laws of all States and text of laws of each State.  
No. 2. Administration of Child Labor Laws:  
Part I. Employment Certificate System, Connecticut. 69 pp. 2 charts. 1915. Bureau publication No. 12.  
Part II. Employment Certificate System, New York. — pp. 3 charts. 1916. Bureau publication No. 17.  
No. 3. List of References on Child Labor. 161 pp. 1916. Bureau publication No. 18.

### Miscellaneous Series:

- No. 1. The Children's Bureau: A circular containing the text of the law establishing the bureau and a brief outline of the plans for immediate work. 5 pp. 1912. Bureau publication No. 1.  
No. 2. Birth Registration: An aid in preserving the lives and rights of children. 20 pp. 3d ed. 1914. Bureau publication No. 2.  
No. 3. Handbook of Federal Statistics of Children: Number of children in the United States, with their sex, age, race, nativity, parentage, and geographic distribution. 106 pp. 2d ed. 1914. Bureau publication No. 5.  
No. 4. Child-Welfare Exhibits: Types and preparation, by Anna Louise Strong, Ph. D. 68 pp. and 16 pp. illus. 1915. Bureau publication No. 14.  
No. 5. Baby Week Campaigns. Suggestions for communities of various sizes. 64 pp. 1915. Bureau publication No. 15.



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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,  
*Washington, June 30, 1916.*

SIR: Herewith I transmit a list of references on child labor.

The first edition of this list was compiled by Mr. A. P. C. Griffin and was published by the Library of Congress in 1906. This second edition was begun in 1914, under the direction of Mr. H. H. B. Meyer, chief bibliographer of the Library of Congress, but the material was transferred to the Children's Bureau because the Library of Congress was committed to the completion of certain larger publications, which made it impracticable for the Library to publish this list at present.

Miss Laura A. Thompson, librarian of the Children's Bureau, has assisted in the preparation of the list, but the great bulk of the work has been done by the Library of Congress.

The Children's Bureau wishes to express its appreciation of the privilege of being associated with the Library of Congress in this publication.

Respectfully submitted.

JULIA C. LATHROP, *Chief.*

Hon. WILLIAM B. WILSON,  
*Secretary of Labor.*

#### NOTE.

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The reports of the State bureaus of labor and the reports of the departments of factory inspection have been included only where a special investigation has been made or where special statistics have been given. Most of the reports of the bureaus of labor contain statistics of children employed and reference to the inspection of child labor where there is no special department of factory inspection. No reference has been made to the child-labor laws as found in these or similar reports, as these are covered by the compilation made by the Children's Bureau. (See No. 577 in this list.)

The numbers at the end of the titles are the shelf numbers of the books in the Library of Congress.

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- 3 **Bullock, Edna Dean, comp.** Selected articles on child labor. 2d and enl. ed. White Plains, N. Y., and New York city, The H. W. Wilson company, 1915. xxvi, 238 p. 20<sup>cm</sup>. (Debaters' handbook series) HD6250.U3B85 1915  
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"The papers in this volume are reprinted from the March, 1909, supplement to the Annals of the American academy of political and social science, in which they were originally published as the Proceedings of the fifth annual conference on child labor held under the auspices of the National child labor committee, Chicago, Ill., January 21-23, 1909."

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derson.—The federal Children's bureau, a symposium, by L. D. Wald, Jane Addams, Leo Arnstein, B. B. Lindsey, H. B. Favill, C. R. Henderson, Florence Kelley, S. McC. Lindsay.—Some unsettled questions about child labor, by O. R. Lovejoy.—The child and the law, by A. J. McKelway.—Child labor in the textile industries and canneries of New England, by E. W. Lord.—Child labor in the Ohio Valley states, by E. N. Clopper.—Practical restrictions on child labor in textile industries; higher educational and physical qualifications, by Howell Cheney.—Scholarships for working children, by Mrs. Florence Kelley.—Some effects of improper posture in factory labor, by A. H. Frelberg.—Child labor and the juvenile court, by J. A. Britton.—Overworked children on the farm and in the school, by Woods Hutchinson.—Handicaps in later years from child labor, by W. E. Harmon.—Accidents to working children, by E. W. De Leon.—Uniform systems of child labor statistics, by John Williams.—The present situation in Illinois, by E. T. Davies.—The forward step in Louisiana, by J. M. Gordon.—The difficulties of child-labor legislation in a southern state, by J. R. McDowell.—Reports from state and local child labor committees.—National child labor committee, fourth annual report of the general secretary and treasurer.—The proceedings of the fifth annual conference on child labor.—State and local committees in co-operation or affiliation with the National child labor committee.—Recent publications of the National child labor committee.—Members of the National child labor committee.

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H1.A4,v.35

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- 326 ——— **Uniform child labor laws.** Proceedings of the seventh annual conference of the National child labor committee. Philadelphia, The American academy of political and social science, 1911. v, 224 p. 25<sup>cm</sup>. (Supplement to the Annals of the American academy of political and social science. July, 1911)

H1.A4,v.38

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Hine.—The glass industry and child labor legislation, by Charles L. Chute.—The coal mines of Pennsylvania, by Owen R. Lovejoy.—New territory, by A. J. McKelway.—Ten years' experience in Illinois, by Jane Addams.—The forward movement in Missouri, West Virginia, and Indiana, by Edward N. Clopper.—The state and the nation in child labor regulation, by William E. Borah.—Reports from state and local child labor committees.—Annual report of the general secretary.

- 327 **National child labor committee.** Child labor and education. [Proceedings of the eighth annual conference] New York, National child labor committee [1912] cover-title, 3l., 223 p. diagrs. 23<sup>cm</sup>. (The child labor bulletin, v. 1, no. 1) HD6250.U3N4

CONTENTS.—National aid to education, by Felix Adler.—A substitute for child labor, by P. P. Claxton.—Child labor and vocational work in the public schools, by E. O. Holland.—Child labor and vocational guidance, by Helen T. Woolley.—Child labor and the future development of the school, by C. G. Pearce.—The dangers and possibilities of vocational guidance, by Alice P. Barrows.—Relation of industrial training to child labor, by W. E. Elson.—Economic value of education, by M. Edith Campbell.—Need of compulsory education in the South, by W. H. Hand.—A federal children's bureau, by A. J. Peters.—Federal aid to education a necessary step in the solution of the child labor problem, by S. McC. Lindsay.—Part time schools, by Florence Kelley.—Social cost of child labor, by J. P. Frey.—Child labor and democracy, by A. J. McKelway.—Extending medical inspection from schools to mills, by G. F. Ross, M. D.—Child labor in the canneries of New York state, by Z. L. Potter.—How to interest young people, by Mrs. Frederick Crane.—The educational test for working children, by R. K. Conant.—A legislative program for South Carolina, by J. P. Hollis.—Rejuvenation of the rural school, by Ernest Burnham.—Rural child labor, by J. M. Gillette.—Symposium: Unreasonable industrial burdens on women and children, by Florence Kelley, Millie R. Trumbull, J. A. Ryan, Jean M. Gordon.—Report of the general secretary for seventh fiscal year.—Proceedings of the eighth annual conference.

- 328 — Child labor and poverty; the papers and addresses and discussions of the ninth National conference on child labor, held at Jacksonville, Fla., March 13-17, 1913, under the auspices of the National child labor committee. New York city, National child labor committee [1913] 2 p. l., 174 p. front. 23<sup>cm</sup>. (The child labor bulletin, v. 2, no. 1) HD6250.U3N4

CONTENTS.—The child breadwinner and the dependent parent [by] Mrs. Florence Kelley.—Child wages in the cotton mills [by] Dr. A. J. McKelway.—Child labor and need [by] M. L. Boswell.—Child labor and poverty: both cause and effect [by] J. A. Kingsbury.—Shall charitable societies relieve family distress by finding work for children. A symposium: i [by] R. T. Solenstein. ii [by] M. H. Newell.—Ancient standards of child protection [by] Rabbi David Marx.—Child labor and low wages [by] Jerome Jones.—The federal Children's bureau [by] J. C. Lathrop.—How to make child labor legislation more effective [by] Dr. S. McC. Lindsay.—From mountain cabin to cotton mill [by] J. C. Campbell.—Social welfare and child labor in southern cotton mills [by] Rev. C. E. Weltner.—The textile industry and child labor [by] R. K. Conant.—The campaign in North Carolina. The mountain whites, by one of them [by] W. H. Swift.—The burden on children in shrimp and oyster canneries [by] L. W. Hine.—Neglected human resources of Gulf coast states [by] E. F. Brown.—Child labor and health [by] Dr. W. H. Oates.—Developing normal men and women [by] J. M. Gordon.—Conditions in child employing industries in the South. A symposium: Alabama: i [by] Mrs. W. L. Murdoch. ii Mississippi: [by] Mrs. E. L. Bailey. South Carolina: iii [by] J. A. McCullough. iv [by] E. F. Brown.—An eight-hour day in a ten-hour state [by] Henry Nichol.—Proceedings of the ninth National conference on child labor.

- 329 — Child labor a national problem; proceedings of the tenth annual conference on child labor, held at New Orleans, La., March 15-18, 1914, under the auspices of the National child labor committee. New York city, National child labor committee (incorporated) 1914. 2 p. l., 200 p. 23<sup>cm</sup>. (The child labor bulletin. v. 3, no. 1) HD6250.U3N4

CONTENTS.—The child labor movement: a movement in the interests of civilization, by Felix Adler; The need of a constructive appeal, by Jane Addams; Protection for American children, by Florence Kelley; The abolition of child labor a national duty, by Felix Adler; National child labor standards, by Samuel McCune Lindsay; Law without enforcement, by A. J. McKelway; Child labor, a menace, by Pauline M. Newman; Enlightening the public, by Mrs. Percy V. Pennyacker; The child in the street, by James H. Blenk, Archbishop of New Orleans; Why overlook the street worker? by Edward N. Clopper; Cutting child labor out of the vicious circle, by Owen R. Lovejoy; The high cost of child labor, by Lewis W. Hine; Neglected childhood and defectiveness, by Alexander Johnson; Why it is hard to get good child labor laws in the South, by Wiley H. Swift; A report from South Carolina, by Joseph A. McCullough; Child labor reform

in Alabama, by Mrs. W. L. Murdoch; The last stand of the one business which opposes child labor legislation in the South [cotton manufactures] by Wiley H. Swift; The eight-hour day in Massachusetts factories, by Richard K. Conant; Tasks in the tenements, by Lewis W. Hine; Ideal child labor in the home, by Jessie P. Rich; Sixteen years of childhood for Ohio girls, by Ella M. Haas; Proper issuance of work permits, by George A. Hall; Woman's place in law enforcement, by Anna Herkner; European and American methods of training factory inspectors, by Herschel H. Jones; Enforcing officials and the courts, by Mornay Williams; Newspapers and child labor, by Anna Rochester; Cooperation of the schools in reducing child labor, by Frank M. Leavitt; Heckling the schools, by Edward N. Clopper; Agricultural labor and school attendance, by Harry M. Bremer; What is a child worth? by Josephine J. Eschenbrenner; Present needs and activities of the National child labor committee, by Owen R. Lovejoy; Proceedings of tenth annual conference; Directory of state and local child committees.

- 330 National child labor committee.** Proceedings of the eleventh annual conference. Part 1, held at Washington, D. C., Jan. 1915. Part 2, held at San Francisco, Cal., May, 1915. New York, National child labor committee, 1915. 131 p. 23cm. (The child labor bulletin, v. 4, no. 1, 2) HD6250.U3N4

CONTENTS.—Part 1. Child labor and illiteracy, by Mrs. Florence Kelley; Cooperative administration of child labor laws, by A. Herkner; Effect of uniform labor standards on interstate competition, by H. P. Kendall; Demand for a square deal for the cotton manufacturers of the South, by David Clark, with discussion; Symposium on a national child's charter; Some secondary considerations, by W. H. Swift; Precedents for federal child labor legislation, by T. I. Parkman. Part 2. The child labor movement, by Felix Adler; Social responsibility for child labor, by Bishop Edwin H. Hughes; Enforcement in Wisconsin, by James D. Beck; Federal control of child labor, by Owen R. Lovejoy; Responsibility of the federal government, by Mrs. Florence Kelley; Child labor in the West; Some local child labor problems in California, by Lewis W. Hine; A charter for childhood: New ideals in the schools, Jessica B. Peixotto; The right to play, by E. D. DeGroot; The seven sins of child labor, by Felix Adler.

- 330a** ——— Proceedings of the twelfth annual conference on child labor, Asheville, N. C., February 3-6, 1916. New York, National child labor committee, 1916. 78 p. 23cm. (The child labor bulletin, v. 5, no. 1.)

CONTENTS.—Vocational scholarships, by Lillian D. Wald; Attempted child labor legislation in North Carolina, by Zebulon Weaver; True preparedness in greater protection to childhood, by Samuel McCune Lindsay; Moving forward in Alabama, by Mrs. W. L. Murdoch; The effects of child labor on social standards, by Mrs. Thomas W. Lingle; The effect of child labor upon community life, by Eunice Sinclair; Pan-American child welfare, by Edward N. Clopper; Organized labor and child labor reform, by James F. Barrett; The citizen and the National child labor committee, by Josephine J. Eschenbrenner; Two conceptions of child employment, by Wiley H. Swift; Federal child labor legislation, by Edward Keating; Child labor in North Carolina, by Dr. George T. Winston; What will be left for the States to do after the Keating bill becomes a law? by Florence Kelley.

- 331** ——— 8th-11th annual reports of the general secretary. Owen R. Lovejoy. Child labor bulletin, Nov. 1912, v. 1: 1-25; Nov. 1913, v. 2: 12-32; Nov. 1914, v. 3: 8-29; Nov. 1915, v. 4: 144-154. HD6250.U3N4

For earlier reports see Proceedings of the committee.

- 332** ——— An address to the citizens of twelve states on the child labor laws you should enact in 1914. Child labor bulletin, Nov. 1913, v. 2, no. 3: 33-43.

HD6250.U3N4,v.2

- 333** ——— The campaign against child labor; a monthly department officially furnished. Woman's home companion, Jan.-Oct. 1907, v. 34: 24; 58-59; 46-47; 28; 24, 57; 22; 20; 22; 25; 13. AP2.W714,v.34

- 334** ——— Can we afford child labor? Including the exhibit handbook prepared to accompany the twenty-five panel exhibit at the exposition in San Francisco. New York city, National child labor committee, incorporated, 1915. 48 p. illus., diagrs. 22½cm. (The child labor bulletin. v. 3, no. 4)

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CONTENTS.—Notes.—Book review [by] Anna Rochester.—Girls at work and why they work [by] Helen C. Dwight.—Child flower-makers in New York tenements [by] Eleanor H. Adler.—What the government says about cotton mills [by] Anna Rochester and Florence Taylor.—The high cost of child labor; exhibit handbook, with photographs by the staff photographer, Lewis W. Hine.



- 335 **National child labor committee.** Child labor, a study course on its extent, causes, effects, and prevention. New York city, National child labor committee [1912?] 40 p. 23<sup>cm</sup>. (National child labor committee. Pamphlet no. 183)
- 336 ——— The child labor bulletin. Pub. by National child labor committee. v. 1, June, 1912-v. 5, May, 1916. New York, 1912-1916. 5 v. 23<sup>cm</sup>.  
HD6250.U3N4
- 337 ——— Child labor facts for sermon use. New York city, 1915. 4 p. 23<sup>cm</sup>. (Its Pamphlet no. 239, Jan. 1915) HD6250.U3N2,no.239
- 338 ——— Child labor in 1912. New York, National child labor committee, 1912. 84 p. 23<sup>cm</sup>. (The child labor bulletin, v. 1, no. 3) HD6250.U3N4,v.1  
CONTENTS.—Child labor in 1912. Eighth annual report of National child labor committee.—Home work in the tenement houses of New York city, by Owen R. Lovejoy; Elizabeth C. Watson.—Employment of children on the stage, by Owen R. Lovejoy. A study course on child labor.
- 339 ——— Child labor, statistics, causes, effects, prevention. New York city [1912?] 22 p. 23<sup>cm</sup>. (Its Pamphlet no. 185)
- 340 ——— Child labor stories for children. New York city, National child labor committee [1913] 81 p. illus. (1 col.) 23<sup>cm</sup>. (The child labor bulletin, v. 2, no. 2) HD6250.U3N4,v.2  
CONTENTS.—A song of the factory [by] J. F. Montague.—The story of the medicine bottle.—Hymn for the working children [by] Fanny J. Crosby.—The story of my cotton dress.—Dolly dear.—Mr. Coal's story.—"To little sister."—Declaration of dependence.—The toll.—Two little members.—What some children have done for the working children.—The story of old [by] Jemima Luke.—We need love's tender lesson taught [by] Whittier.—Child labor in Georgia, a story for grownups [by] A. J. McKelway.
- 341 ——— Child labor ten years after. New York, National child labor committee, 1914. 75 p. 23<sup>cm</sup>. (Child labor bulletin, v. 3, no. 3)  
HD6250.U3N4,v.3  
CONTENTS.—Editorial notes; Tenth annual report of the General secretary; The extent of child labor officially measured, by Edward N. Clopper; Child labor and delinquency, by Fred S. Hall; Children who weave silk, by Eleanor H. Adler; Mortality among cotton operatives, by Florence Taylor; Dangerous machines in the metal trades, by Helen C. Dwight.
- 342 ——— Child labor in canneries . . . with other special articles. New York city, National child labor committee, 1913. 3 p. l., 95 p. incl. plates, maps. 23<sup>cm</sup>. (The child labor bulletin, v. 1, no. 4) HD6250.U3N4,v.1  
CONTENTS.—Child labor and poverty: advance program of the 9th National conference on child labor.—The important provisions of existing child labor laws.—Child labor in New York canning factories [by] E. F. Brown.—Day and night in a vegetable canning factory: a personal experience [by] J. J. Eschenbrenner.—Photographic reproductions of children in fruit and vegetable, oyster, and shrimp canneries.—Child labor and health [by] O. R. Lovejoy.—Some dangers in the present movement for industrial education [by] John Dewey.—Overwork, idleness or industrial education [by] William Noyes.—The child that tolleth not; a reply to Mr. Dawley.
- 343 ——— The clinker, and some other children. New York, National child labor committee, incorporated, 1914. 62 p. illus., pl. 23<sup>cm</sup>.  
"Stories and verse about children who work."—Foreword. HD6250.U3N5 1914
- 344 ——— Constitution. American academy of political and social science, Annals, Supplement, July, 1911, v. 38:202-207. H1.A4,v.38  
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- 345 ——— The eight-hour day and prohibition of night work. American academy of political and social science, Annals, Supplement, Mar. 1910, v. 35:239-274. H1.A4,v.35  
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- 346 National child labor committee.** The federal child labor bill; program of tenth annual conference on child labor, New Orleans, La., March 15-18, 1914, with a copy of the federal child labor bill and a memorandum on its constitutionality. New York city, National child labor committee, 1914. 79 p. illus., col. diagr. 23<sup>cm</sup>. (The child labor bulletin, v. 2, no. 4) HD6250.U3N4  
 CONTENTS.—Editorial notes.—Program of tenth annual conference on child labor.—Federal government and child labor, and memorandum on the Palmer child labor bill [by] O. R. Lovejoy.—Ten years of child labor reform in the South [by] A. J. McKeelway.—The eight-hour day [by] Anna Rochester.—The majesty of the law in Mississippi [by] E. N. Clopper.—Present conditions in the South [by] L. W. Hine.—Strawberry pickers of Maryland [by] H. M. Bremer.—The work of England's certifying surgeons [by] H. H. Jones.
- 347 ——— High cost of child labor . . . exhibit handbook.** [New York city, 1915] 20 p. 23<sup>cm</sup>. (*Its Pamphlet no. 241*, Jan. 1915) HD6250.U3N2,no.241  
 High cost of child labor. Reprint of exhibit handbook. Child labor bulletin, Feb. 1915, v. 3: 25-45. HD6250.U3N4,v.3
- 348 ——— How to obtain foreign birth certificates.** National child labor committee. New York, 1909. Pamphlet no. 116. 8 p. HD6250.U3N2,no.116
- 349 ——— Leaflet[s]** New York, 1904-1913. 38 pams. illus. 15½<sup>cm</sup>. HD6250.U3N19
- 350 ——— Little comrades who toil.** New York city, 1914. 84 p. 23<sup>cm</sup>. (Child labor bulletin, Aug. 1914, v. 3, no. 2, pt. 1) HD6250.U3N4,v.3
- 351 ——— Pamphlet[s].** National child labor committee. New York, 1905-1916. 260 pams. illus. 23-24<sup>cm</sup>. HD6250.U3N2  
 The pamphlets, which are consecutively numbered, comprise addresses and proceedings (reprinted from the "Proceedings"), annual reports, etc.
- 352 ——— Stories about the other child.** [New York, 1913] 79 p. 25<sup>cm</sup>. (Supplement to the Child labor bulletin. v. 2, no. 3, Dec. 1913) HD6250.U3N4,v.2
- 353 ——— The voice of the church against child labor.** National child labor committee. New York, 1908. Pamphlet no. 89. [4] p. HD6250.U3N2,no.89
- 354 National conference of charities and correction.** Proceedings. Boston [etc.] 1875-1915. ports., map, tables. 22½-24<sup>cm</sup>.  
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- 355 National consumers' league.** The consumer's control of production: the work of the National consumers' league. Philadelphia, The American academy of political and social science, 1909. 1 p. l., 83 p. 25½<sup>cm</sup>. (Supplement to the Annals of the American academy of political and social science. July, 1909) HD6957.U6N3  
 HI.A4,v.34  
 PARTIAL CONTENTS.—Work at night by girls and boys under 21 years. The eight hours day for working children. Investigations. (a) The standard of living of working girls and women away from home. (b) Children illegally at work.
- 356 National federation of settlements.** Young working girls; a summary of evidence from two thousand social workers, ed. by Robert A. Woods and Albert J. Kennedy, its secretaries; with an introduction by Jane Addams. Boston and New York, Houghton Mifflin company, 1913. xiii, 185, [1] p. 19½<sup>cm</sup>. HQ798.N3
- 357 Nearing, Scott.** The history of a Christmas box. Charities and the Commons, Dec. 29, 1906, v. 17: 555-558. HV1.C4,v.17

- 358 **Nearing, Scott.** Social adjustment. New York, The Macmillan company, 1911. xvi p., 1 l., 377 p. 19½<sup>cm</sup>. HN64.N42  
Child labor, p. 243-265.
- 359 ——— Social religion; an interpretation of Christianity in terms of modern life. New York, The Macmillan company, 1913. xvi p., 2 l., 227 p. 19½<sup>cm</sup>. HN31.N4  
The factory child: p. 73-88.
- 360 ——— The solution of the child labor problem. New York, Moffat, Yard and company, 1911. viii, 145 p. 18½<sup>cm</sup>. HD6231.N4
- 361 **Neill, Charles Patrick.** Child labor at the national capital. [Philadelphia? 1906?] 11 p. 23<sup>cm</sup>. HD6250.U4D6 1906a  
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(In U. S. Congress. House. Committee on the District of Columbia. Report of hearings . . . 1906, . . . to regulate child labor in the District of Columbia . . . Washington, 1906. 23<sup>cm</sup>. p. 55-59) LC132.D6A3
- 362 **New Jersey. Bureau of statistics of labor and industries.** 26th Annual report, 1903. Trenton, 1903. illus. 23½<sup>cm</sup>. HC107.N5A2  
The social aspect of child labor in New Jersey, 1903: p. 241-421.
- 363 ——— **Inspector of child labor.** Annual report, 1st, 1883. Trenton, N. J., 1883. 1 v. 22½<sup>cm</sup>. HD6250.U4N5
- 364 **New York (State) Bureau of labor statistics.** Conditions of entrance and advancement in individual industries. (In its 26th annual report, 1908. Pt. 1: p. 51-189) HC107.N7A3 1908
- 365 ——— **Factory investigating commission.** Preliminary report. Transmitted to the Legislature March 1, 1912. Albany, The Argus company, printers, 1912. 3 v. plates (part fold.) diagrs. 23<sup>cm</sup>. HD8053.N7A4 1912  
Robert F. Wagner, chairman.  
The appendices are issued also separately, as reprints.  
Child labor: Extent of child labor in New York state: v. 1, p. 101-106; Appendix VII: Home work in the tenement houses of New York city, Memoranda by Owen R. Lovejoy, Elizabeth C. Watson; Photographs: p. 571-584. Answers to Questionnaire on Employment of women and children: p. 646-649. See also Index of witnesses: v. 2, p. iii-xxvi for references to child labor.
- 366 ——— Second report. Transmitted to the Legislature January 15, 1913. Albany, J. B. Lyon company, printers, 1913. 2 v. plates, plans, diagrs. (part fold.) 23<sup>cm</sup>. [Legislature, 1913. Senate doc. 36] HD8053.N7A5 1913  
Robert F. Wagner, chairman.  
Report: Child labor in the canneries: p. 127-143; Child labor: p. 176-192. Report on manufacturing in tenements in New York state, by Elizabeth C. Watson, v. 2, p. 667-755; Industrial conditions in the canning industry of New York state, by Z. L. Potter, v. 2, p. 757-915; Preliminary report on employment of women and children in mercantile establishments, by Pauline Goldmark and George A. Hall, v. 2, p. 1193-1270.  
See also Indexes to Third and Fourth reports.
- 367 **New York child welfare exhibit,** 1911. Handbook of the New York child welfare exhibit in the 71st regiment armory from Jan. 18 to Feb. 12, 1911. [New York, Blanchard press, 1911] 82 p. illus. 24<sup>cm</sup>. HV709.N5 1911  
Work and wages, p. 33-35.
- 368 **Newell, Mary H.** Shall charitable societies relieve family distress by finding work for children? Child labor bulletin, May, 1913, v. 2, no. 1: 39-41. HD6250.U3N4,v.2
- 369 **Nichol, Henry.** An eight-hour day in a ten-hour state [Tennessee]. Child labor bulletin, May, 1913, v. 2, no. 1: 142-144. HD6250.U3N4,v.2

- 370 **North Carolina. Bureau of labor and printing. Annual report. 20th-27th. 1906-1913.** Raleigh, N. C. [etc.] 1906-1913. 8 v. plates, tables. 24 $\frac{1}{2}$ "<sup>cm</sup>. HC107.N8A2  
1906-1908: Contain letters from wage-earners, manufacturers, mill men, editors and publishers, and farmers in regard to child labor.  
1913: Statistics of average wages paid children, 1890-1912: p. 210-212.
- 371 **Noyes, William.** Overwork, idleness, or industrial education? American academy of political and social science, Annals, Mar. 1906, v. 27: 342-353. H1.A4,v.27  
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- 372 **Obenauer, Marie Louise, and Mary Conyngton.** Employment of children in Maryland industries. (In U. S. Bureau of labor. Bulletin, Sept. 1911, no. 96: 466-487) HD8051.A5,no.96
- 373 ——— and **Bertha von der Nienburg.** Effect of minimum-wage determinations in Oregon. Washington, Govt. print. off., 1915. 108 p. 23"<sup>cm</sup>. (Bulletin of the United States Bureau of labor statistics, whole no. 176. Women in industry series, no. 6) HD8051.A62,no.176  
Issued also as House doc. 1709, U. S., 63d Cong., 3d sess. Rates of pay before and after minimum-wage determinations of girls under 18 years of age: p. 19-20.
- 374 **Ohio. Industrial commission. Dept. of investigation and statistics.** Industrial accidents in Ohio, January 1, 1914, to June 30, 1915. Columbus, O., 1916. 231 p. 23 $\frac{1}{2}$ "<sup>cm</sup>. (Its Report no. 21)  
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Includes statistics of accidents to minors under 18 years of age.
- 375 **Oregon. Board of inspectors of child labor.** Report. Salem, Or. 1913-15. 2 v. 23"<sup>cm</sup>. HD6250.U407
- 376 ——— **Child welfare commission.** Biennial report, 1913-14. [Portland? Or.] 1915. 23"<sup>cm</sup>.
- 377 ——— **Industrial welfare commission.** Biennial report. 1st, 1913-14, Salem, Or., 1915. 15 p. 23"<sup>cm</sup>. HD6093.072
- 378 **Pennsylvania. Governor, 1915. (Martin G. Brumbaugh)** Inaugural address, Jan. 19, 1915. Harrisburg, Pa., W. S. Ray, 1915. 11 p. 23"<sup>cm</sup>.  
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- 379 **Pennsylvania child labor committee.** Child labor and the people of Pennsylvania. Third annual report, 1906-7. Philadelphia, Pennsylvania child labor committee 1907. 31 p. 15 $\frac{1}{2}$ "<sup>cm</sup>. (Child labor leaflet, no. 2) HD6250.U4P6
- 380 **Pennsylvania three-ply child labor campaign.** Survey, Mar. 18, 1911, v. 25: 993-994. HV1.C4,v.25  
Glass factories: messengers: mines.
- 381 **Pratt, E. E.** Child labor: a rational statement. Arena, June, 1907, v. 37: 613-619. AP2.A6,v.37
- 382 **Pray, K. L. M.** Child labor, mothers, and manufacturers. Survey, Mar. 27, 1915, v. 33: 865. HV1.C4,v.33
- 383 **The Problem of child labor with special reference to Philadelphia.** Addresses by Samuel Zane Batten; Charles Edwin Fox; Henry J. Gideon; Joseph H. Hegedorn; and Mrs. Florence Kelley. City club of Philadelphia. City club bulletin, Feb. 5, 1913, v. 6: 216-224. JS1216.C47,v.6
- 384 **Progressive party. New York. Legislative committee.** Statement as to the official proposal of the National progressive party in the state of New York for a minimum wage act (also containing the text of the party's official bill) prepared for introduction into the Legislature of the state of New York. [New York] The Legislative committee of the National progressive party in the state of New York, 1913. 14 p. 23"<sup>cm</sup>. [Its Publications, 6] HD4918.P8

- 385 **Rauchberg, Heinrich.** Die Erhebung über Frauen- und Kinderarbeit in den Vereinigten Staaten. Archiv für soziale Gesetzgebung und Statistik, 1898, v. 12: 135-147. H5.A8,v.12
- 386 **Rhode Island. Bureau of industrial statistics.** Fifth annual report, 1891. Providence: E. L. Freeman & son, 1892. xiv, 191 p. 23<sup>cm</sup>. HC107.R4A2 1891
- CONTENTS.—Laws of the several states relative to the employment and education of children, p. 3-21; Opinions and remarks of superintendents, members of committees, principals and teachers of schools, clergymen, and physicians relative to child labor, p. 22-62; Census of children employed by occupations, age, place of birth, parent nativity, and sex, p. 63-165; Wages of children, p. 166-181; School attendance and absentees, p. 185-188.
- 387 **Richmond, Mary Ellen.** The good neighbor in the modern city. Philadelphia and London, J. B. Lippincott company, 1907. 152 p., 1 l. 16 $\frac{1}{2}$ <sup>cm</sup>. (Sage foundation publication) HV4028.R53
- The child at work, p. 44-53.
- 388 **Roberts, Peter.** Child labor in eastern Pennsylvania. Outlook, Dec. 17, 1904, v. 78: 982-985. AP2.O8, v.78
- 389 **Robinson, Clarence C.** The wage-earning boy. New York [etc.] Association press, 1912. 108 p. 17 $\frac{1}{2}$ <sup>cm</sup>. Bibliography: p. [106]-108.
- 390 **Rochester, Anna.** The eight-hour day for children. National child labor committee. New York, 1914. Pamphlet no. 212. 16 p. HD6250.U3N2,no.212
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- 391 ——— What do American people want for their children? Survey, Apr. 11, 1914, v. 32: 49. HV1.C4,v.32
- 392 **Roosevelt, Theodore.** The conservation of childhood. American academy of political and social science, Annals, Supplement, July, 1911, v. 38: 8-16. H1.A4,v.38
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- 393 ——— The conservation of womanhood and childhood. Outlook, Dec. 23, 1911, v. 99: 1013-1019. AP2.O8,v.99
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- 395 ——— Where I stand on child labor reform. Woman's home companion, Jan. 1907, v. 34: 15. AP2.W714,v.34
- 396 **Roseboro, Viola and Marie Best.** Nora Mahoney—a human document: a true story of child slavery in Philadelphia. Woman's home companion, Aug. 1906, v. 33: 3-4. AP2.W714,v.33
- 397 **Ross, William Edward.** What do you care? Pearson's magazine, Apr. 1913, v. 29: 482. AP2.P35,v.29
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- 633 **National child labor committee, New York.** The Federal child labor bill; program of tenth annual conference on child labor, New Orleans, La., March 15-18, 1914, with a copy of the federal child labor bill and a memorandum on its constitutionality. New York city, National child labor committee, 1914. 79 p. illus., col. diagr. 23<sup>cm</sup>. (The child labor bulletin, v. 2, no. 4) HD6250.U3N4,v.2

CONTENTS.—Editorial notes.—Program of tenth annual conference on child labor.—Federal government and child labor, and memorandum on the Palmer child labor bill [by] O. R. Lovejoy.—Ten years of child labor reform in the South [by] A. J. McKelway.—The eight-hour day [by] Anna Rochester.—The majesty of the law in Mississippi [by] E. N. Clopper.—Present conditions in the South [by] L. W. Hine.—Strawberry pickers of Maryland [by] H. M. Bremer.—The work of England's certifying surgeons [by] H. H. Jones.

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- 636 ——— Why you should support the Palmer-Owen bill. Pamphlet no. 240. Jan. 1915. 4 p. .  
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- 637 **Palmer-Owen child labor bill.** Outlook, Oct. 10, 1914, v. 108: 8.  
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- 641 ——— Constitutionality of the Keating-Owen child-labor bill. A brief in support of the constitutionality of the bill. Congressional record, 64th Cong., 1st sess., v. 53, no. 33 (current file): 2058-2066.
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- 643 ——— Precedents for federal child labor legislation. Child labor bulletin, May, 1915, v. 4: 72-82.  
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- 646 **Survey [Editorial].** Progress of the federal child labor bill. Survey, Sept. 19, 1914, v. 32: 606.  
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- 649 **U. S. Congress. House. Committee on labor.** Child labor bill. Hearings before the Committee on labor, House of representatives, Sixty-third Congress, second session, on H. R. 12292, a bill to prevent interstate commerce in the products of child labor, and for other purposes. February 27 [and March 9] 1914. Washington, Govt. print. off., 1914. 9, ii, 11-83 p. 23<sup>cm</sup>.  
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- 654 ————— **Committee on the judiciary.** Jurisdiction and authority of Congress over the subject of woman and child labor. Report. <To accompany H. res. no. 807> [Washington, Govt. print. off.] 1907. 8 p. 23<sup>cm</sup>. (59th Cong., 2d sess. House. Rept. no. 7304)
- 655 ————— **Senate. Committee on interstate commerce.** Interstate commerce in products of child labor. Report. <To accompany H. R. 12292> [Washington, Govt. print. off., 1915] 2 p. 24½<sup>cm</sup>. (63d Cong., 3d sess. Senate. Rept. 1050)  
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- 656 ————— Interstate commerce in products of child labor. Hearings before the Committee on interstate commerce, U. S. Senate, Sixty-fourth Congress, first session, on H. R. 8234, an act to prevent interstate commerce in the products of child labor, and for other purposes. Washington, Govt. print. off., 1916. 290, ii, 291-319 p. 23<sup>cm</sup>.  
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- 657 ————— To prevent interstate commerce in the products of child labor. Report. <To accompany H. R. 8234> [Washington, Govt. print. off., 1916] 23 p. 23<sup>cm</sup>. (64th Cong., 1st sess. Senate. Rept. 358)  
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- 658 ————— **Laws, statutes, etc.** 63d Cong., 3d sess. H. R. 12292. An act to prevent interstate commerce in the products of child labor, and for other purposes. Feb. 19 (calendar day, March 1) 1915. 4 p. J301913-15, v. 33
- 659 ————— 64th Cong. 1st sess. H. R. 8234. A bill to prevent interstate commerce in the products of child labor, and for other purposes. Introduced in the House of representatives, Jan. 7, 1916, by Mr. Keating. 5 p. 27½<sup>cm</sup>.



- 660 **Villard, O. G.** The federal child labor bill. Nation, Jan. 31, 1907, v. 84: 98.  
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59TH CONG., 1ST SESS. VOL. 40.

- 661 **U. S. Congress. House.** Child labor in the District of Columbia. Debate in the House, Apr. 9, 1906. pt. 5: 4967-4971.  
Messrs. Morrell, Fitzgerald, Tawney, Madden, and Crumpacker.
- 662 ——— **Senate.** Child labor in the District of Columbia. Debate in the Senate, June 6, 1906. pt. 8: 7914-7915.  
Senators Dubois, Hale, Lodge, Scott, and Tillman.

59TH CONG., 2D SESS. VOL. 41.

- 663 **Bacon, Augustus O.** Remarks in the Senate, Feb. 4, 1907, on employment of child labor. pt. 3: 2214-2216.  
Contains text of the Georgia law.
- 664 **Beveridge, Albert J.** Speeches in the Senate, Jan. 23, 28, 29, 1907, on employment of child labor in the District of Columbia. pt. 2: 1552-1557, 1792-1826, 1867-1883.
- 665 **Crumpacker, Edgar D.** Woman and child workers in the United States. Speech in the House of representatives, Jan. 21, 1907. pt. 2, p. 1458-1460, 1461, 1473.
- 666 **Gardner, Augustus P.** Woman and child workers in the United States. Speech in the House of representatives, Jan. 21, 1907. pt. 2, p. 1462-1463.

60TH CONG., 1ST SESS. VOL. 42.

- 667 **Fulton, Charles W.** Employment of child labor. Speech in the Senate May 6, 1908. Appendix, p. 474-475.
- 668 **U. S. Congress. House.** Child labor in District of Columbia. May 9, 1908, pt. 6: 6030-6035.  
Text of bill.
- 669 ——— **Senate.** Employment of child labor [in the District of Columbia] May 6, 1908. pt. 6: 5785-5802.
- 670 ——— Employment of child labor in the District of Columbia. Debate in Senate, May 21, 1908. pt. 7: 6982-6985.
- 671 ——— Conference report on child-labor law. May 22, 1908. pt. 8: 7077-7078.

63D CONG., 2D SESS., VOL. 51.

- 672 **Rogers, John Jacobs.** Out-Heroding Herod. Extension of remarks in the House, Sept. 29, 1914. Appendix: 1046-1054.  
Gives a summary of the legislation enacted in the various states.
- 673 **U. S. Congress. House.** Debate in the House, Mar. 18, 1914, on an amendment relating to child labor to bill H. R. 14330, relating to convict-made goods. pt. 5: 5055-5066.  
Messrs. Kelley (Mich.), Bartlett, Mann, McLaughlin, Howard, Fordney, Madden, and others.

63D CONG., 3D SESS., VOL. 52.

- 674 **Clark, David.** A demand for a square deal. Speech before the National child labor conference, recently held in the city of Washington. Appendix: 169-170.  
Introduced into the Record, Jan. 23, 1915, by Mr. Webb.  
Opposed to federal bill.

- 675 **Georgia. Laws, statutes, etc.** An act regulating the employment of children. Aug. 14, 1914. pt. 4: 4122-4123.  
Introduced, with a few remarks, by Mr. Palmer.
- 676 **Knowland, Joseph R.** Child-labor. Speech in the House, Feb. 18, 1915. pt. 4: 4022-4023.
- 677 **News & Observer, Raleigh, N. C.** Editorial, "Trying to push back the ocean". pt. 5: 5338.  
Introduced by Mr. Norris.
- 678 **U. S. Congress. House.** Child labor. Debate in the House, Feb. 15, 1915, on the bill (H. R. 12292) to prevent interstate commerce in the products of child labor, and for other purposes, as amended. pt. 4: 3827-3836.  
The rules were suspended and the bill passed.
- 64TH CONG., 1ST SESS. VOL. 53 (CURRENT FILE).
- 679 **Ayres, William A.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 36 (current file): 2270.
- 680 **Blackmon, Fred L.** Child labor. Speech in the House, Feb. 2, 1916. no. 39 (current file): 2541.
- 681 **Borland, William P.** The child-labor bill. Extension of remarks in the House, Jan. 26, 1916. no. 31 (current file): 1937-1938.
- 682 **Carter, William H.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 30 (current file): 1843.
- 683 **Cary, William J.** The child labor bill. Extension of remarks in the House, Jan. 26, 1916. no. 39 (current file): 2542.
- 684 **Church, Denver S.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 40 (current file): 2610-2611.
- 685 **Cline, Cyrus.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 36 (current file): 2269.
- 686 **Cooper, John G.** Child-labor bill. Extension of remarks in the House, Jan. 28, 1916. no. 31 (current file): 1937.
- 687 **Cox, William E.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 33 (current file): 2055-2056.
- 688 **Doughton, Robert L.** Child labor. Speech in the House, Feb. 2, 1916. no. 36 (current file): 2268-2269.
- 689 **Gallivan, James A.** Child labor in mills, factories, and mines. Extension of remarks in the House, Jan. 26, 1916. no. 33 (current file): 2056.  
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- 690 **Gray, Finly H.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 39 (current file): 2538-2539.
- 691 **Green, William R.** The constitutionality of law forbidding the transportation in interstate commerce of the products of child labor. Speech in the House, Feb. 2, 1916. no. 38 (current file): 2476.
- 692 **Hicks, Frederick C.** Right of Congress to regulate the shipment of the products of child labor as a part of interstate commerce. Extension of remarks in the House, Feb. 2, 1916. no. 39 (current file): 2544.
- 693 **Johnston, A. S.** Child labor. Letter favoring the passing of the Keating child-labor bill. Jan. 11, 1916. no. 29 (current file): 1785.  
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- 694 **Keating, Edward.** Child labor. Extension of remarks in the House, Feb. 2, 1916, on the bill (H. R. 8234) no. 35 (current file): 2189-2195.

- 685 **Kennedy, Ambrose.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 33 (current file): 2048-2049.
- 686 **Kenyon, William S.** National child labor law. Speech in the Senate, Feb. 24, 1916. no. 56 (current file): 3661-3694.  
Contains digest of comparative state legislation, and digest of child labor laws of Austria, Belgium, France, Germany, Great Britain, Italy, and Switzerland.
- 697 **Lenroot, Irvine L.** Child labor. Speech in the House, Jan. 26, 1916. no. 30 (current file): 1843-1844.
- 698 **London, Meyer.** Child labor. Speech in the House, Jan. 26, 1916. no. 39 (current file): 2537-2538.
- 699 **McCracken, Robert M.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 44 (current file): 2855-2856.
- 700 **McCulloch, Roscoe C.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 33 (current file): 2066.
- 701 **Nolan, John I.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 39 (current file): 2539-2540.
- 702 **Page, Robert N.** Child labor. Speech in the House, Jan. 26, 1916. no. 38 (current file): 2465-2466.
- 703 **Platt, Edmund.** The child-labor bill. Extension of remarks in the House, Feb. 2, 1916. no. 40 (current file): 2613-2614.
- 704 **Randall, Charles H.** Child labor and humanitarian laws. Extension of remarks in the House, Feb. 2, 1916. no. 39 (current file): 2541.
- 705 **Ricketts, Edwin D.** Child labor. Extension of remarks in the House, Jan. 27, 1916. no. 30 (current file): 1845-1846.
- 706 **Schall, Thomas D.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 38 (current file): 2470-2471.
- 707 **Scott, John R. K.** Child-labor bill. Extension of remarks in the House, Feb. 2, 1916. no. 39 (current file): 2543-2544.
- 708 **Sears, William J.** Child labor. Speech in the House, Feb. 2, 1916. no. 38 (current file): 2475.
- 709 **Shouse, Jouett.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 35 (current file): 2203.
- 710 **Siegel, Isaac.** Child labor—Keating bill. Extension of remarks in the House, Jan. 26, 1916. no. 35 (current file): 2204-2205.
- 711 **Smith, Addison T.** Child labor. Extension of remarks in the House, Feb. 2, 1916. no. 36 (current file): 2262-2264.
- 712 **U. S. Congress. House.** Keating child-labor bill. Remarks in the House, Jan. 19, 1916, on the bill (H. R. 8234). no. 22 (current file): 1424-1425.  
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- 713 ——— Child labor. Debate in the House, Jan. 26, 1916, on the bill (H. R. 8234) to prevent interstate commerce in the products of child labor, and for other purposes. no. 29 (current file): 1744-1768.  
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- 714 ——— Child-labor bill. Debate in the House, Feb. 2, 1916, on the bill (H. R. 8234) no. 35 (current file): 2149-2174.  
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- 715 **Van Dyke, Carl C.** Child-labor bill. Extension of remarks in the House, Jan. 29, 1916. no. 33 (current file): 2049-2050.
- 716 **Vare, William S.** Child labor. Extension of remarks in the House, Jan. 26, 1916. no. 29 (current file): 1789-1790.

- 717 **Watson, Walter A.** Child labor. Speech in the House, Jan. 26, 1916. no. 40 (current file): 2601-2606.
- 718 **Webb, Edwin Y.** Child labor in mills, factories, and mines. Speech in the House, Jan. 26, 1916. no. 32 (current file): 1986-1993.
- 719 **Wood, William R.** Child labor. Speech in the House, Jan. 26, 1916. no. 30 (current file): 1846.

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- 720 **Bliss, H. L.** Census statistics of child labor. *Journal of political economy*, Mar. 1905, v. 13: 245-257. HB1.J7,v.13
- 721 **Clopper, Edward N.** Child worker in the Census report of 1910. Survey, Sept. 26, 1914, v. 32: 628-629. HV1.C4,v.32
- 722 ——— The extent of child labor officially measured. *Child labor bulletin*, Nov. 1914, v. 3, no. 3: 30-36. HD6250.U3N4,v.3,no.3  
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- 723 **Devine, E. T.** Some statistics of child labor. *American academy of political and social science, Annals*, May, 1903, v. 21: 505-506. H1.A4,v.21
- 724 **Drown, Frank S.** The Massachusetts bureau of statistics. *American academy of political and social science, Annals, Supplement*, Mar. 1910, v. 35: 134-136. H1.A4,v.35
- 725 **Hall, Fred S.** Child labor statistics. *American academy of political and social science, Annals, Supplement*, Mar. 1910, v. 35: 114-126. H1.A4,v.35  
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- 727 **Sargent, Frank B.** Census statistics on employment of children in manufactures. *Journal of political economy*, Oct. 1910, v. 18: 628-633. HB1.J7,v.18
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- 732 **Whittemore, Gilbert E.** The Providence school census system. *American academy of political and social science, Annals, Supplement*, Mar. 1910, v. 35: 130-133. H1.A4,v.35

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- 735 **Annuaire de la législation du travail**, publié par l'Office du travail de Belgique. 1-16. année; 1897-1912. Bruxelles, 1898-1914. 16 v. 24½<sup>cm</sup>.  
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- 736 **Arendt, Henriette, sister.** Kleine weisse Sklaven. Berlin-Charlottenburg, Vita, deutsches verlagshaus [c1911] 208 p. 19<sup>cm</sup>.  
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- 1095 ——— **The child's burden in oyster and shrimp canneries.** [New York, 1913] 32 p. 23<sup>cm</sup>. (Pamphlet no. 193)  
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- 1149 ——— *comp.* What the United States government says about child labor in tenements.  
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- 1152 **Hird, Frank.** The cry of the children; and exposure of certain British industries in which children are iniquitously employed. London, J. Bowden; New York, M. F. Mansfield, 1898. 96 p. illus., plates. 19cm  
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- 1154 **Hopkins, Mary Alden.** Children in bondage: turning children's homes into factories. Good housekeeping, June, 1913, v. 56: 743-752. TX1.G7,v.56
- 1155 ——— Our other children. Collier's, July 20, 1912, v. 49: 12-13.  
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- 1157 **Kelley, Mrs. Florence.** Insanitary conditions amongst home workers. (*In* International congress of women, London, 1899. London, 1900. 20 $\frac{1}{2}$ cm. v. 6, p. 21-25.) HQ1106 1899,v.6
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- 1159 **Lovejoy, Owen R.** Memorandum on tenement-house work in New York city. Child labor bulletin, Nov. 1912, v. 1, no. 3: 26-31 HD6250.U3N4,v.1
- 1160 ——— Some unsettled questions about child labor. American academy of political and social science, Annals, Supplement, Mar. 1909, v. 33: 49-62. H1.A4,v.33  
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- 1167 **National child labor committee, New York.** Children who work in the tenements. New York, 1908. Pamphlet no. 84. 8 p. HD6250.U3N2,no.84
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- 1169 **Netherlands (Kingdom, 1815- ) Directie van den arbeid.** Onderzoekingen naar de toestanden in de Nederlandsche huisindustrie . . . Uitg. voor rekening van het Departement van landbouw, nijverheid en handel. 's-Gravenhage, Ter Algemeene landsdrukkerij, 1911-14. 3 v. plates. 26½<sup>cm</sup>. [Uitgaven no. 7a, 7b, 7c] HD2336.N2A3  
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- 1648 **Nation** (London) [Editorial] The waste of child labor. **Nation** (London) Feb. 28, 1914, v. 14: 891-892. AP4.N15,v.14
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- 1711 **Ayres, Leonard Porter.** Constant and variable occupations and their bearing on problems of vocational education . . . New York city, Division of education, Russell Sage foundation [1914] 11 p. 23<sup>cm</sup>. ([Russell Sage foundation, New York. Pamphlet] E 136) LC1045.A9
- 1712 **Birmingham, Eng. Education committee.** Report of the special subcommittee on the institution of a juvenile employment bureau and care committee in Birmingham. Adopted by the Education committee, Dec. 16, 1910. Birmingham, Percival Jones, 1910. 36 p.
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- 1716 ——— Information concerning certain trades for women and girls. [n. p., n. d.] 13 p. 21½<sup>cm</sup>.
- 1717 **Bradford, Eng. Education committee.** Occupations open to young people in Bradford. Building trades: clerks, butchers, grocers, photographers, tailors. [n. p., n. d.] 26 p. 23<sup>cm</sup>.
- 1718 ——— Engineering trade section. [n. p., n. d.] 23 p. 24½<sup>cm</sup>.
- 1719 ——— Printing trade, shop assistants, sheet metal workers, tramway employees, boot and shoe trade, saddlers, leather goods manufacturers [etc.] [n. p., n. d.] 38 p. 24½<sup>cm</sup>.
- 1720 ——— Professions. Accountants, architects, auctioneers, bankers, chemists, dentists, solicitors, teachers, civil service. [n. p., n. d.] 29 p. 24<sup>cm</sup>.
- 1721 ——— Women's section. Nurses, dressmakers, milliners, machinists, laundresses, waitresses, domestic servants. [n. p., n. d.] 23 p. 23<sup>cm</sup>.
- 1722 ——— Woollen and worsted trade section. [n. p., n. d.] 16 p. 24<sup>cm</sup>.
- 1723 ——— **Juvenile employment special sub-committee.** Report of work for the period ended 31st Dec. 1913. [n. p., 1914?] 24 p. 23<sup>cm</sup>.
- 1724 **Campbell, M. Edith.** The vocation and employment bureau of Cincinnati. National child labor committee, New York, 1910. Pamphlet no. 132, p. 17-20. HD6250.U3N2,no.132
- 1725 **Cardiff. Education committee. Juvenile employment and central care committee.** 1st annual report of the Juvenile employment committee. 1912-13. Cardiff [1913?] 28 p. 32½<sup>cm</sup>.
- 1726 **Chamberlain, Norman.** Labour exchanges and boy labour. Economic review, Oct. 15, 1909, v. 19: 400-409. HB1.E4,v.19

- 1727 **Chicago school of civics and philanthropy. Dept. of social investigation.** Finding employment for children who leave the grade schools to go to work. [Chicago, Manz engraving company, The Hollister press, 1911] 56 p. 26<sup>cm</sup>. HF5381.C6  
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- 1728 **Cincinnati. Chamber of commerce and merchants' exchange. Survey committee.** Printing trades. Cincinnati, O., Cincinnati chamber of commerce [1915] 141 p. chart. 22½<sup>cm</sup>. Z122.C56  
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- 1729 **Davis, Anne.** Occupations and industries open to children between fourteen and sixteen years of age. Chicago, Board of education, 1914. 19 p. 18½<sup>cm</sup>.
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- 1731 **Dodge, Harriet Hazen.** Survey of occupations open to the girl of fourteen to sixteen years. Boston, Mass., Girls trade education league, 1912. 39 p. 23<sup>cm</sup>. HD6058.D7
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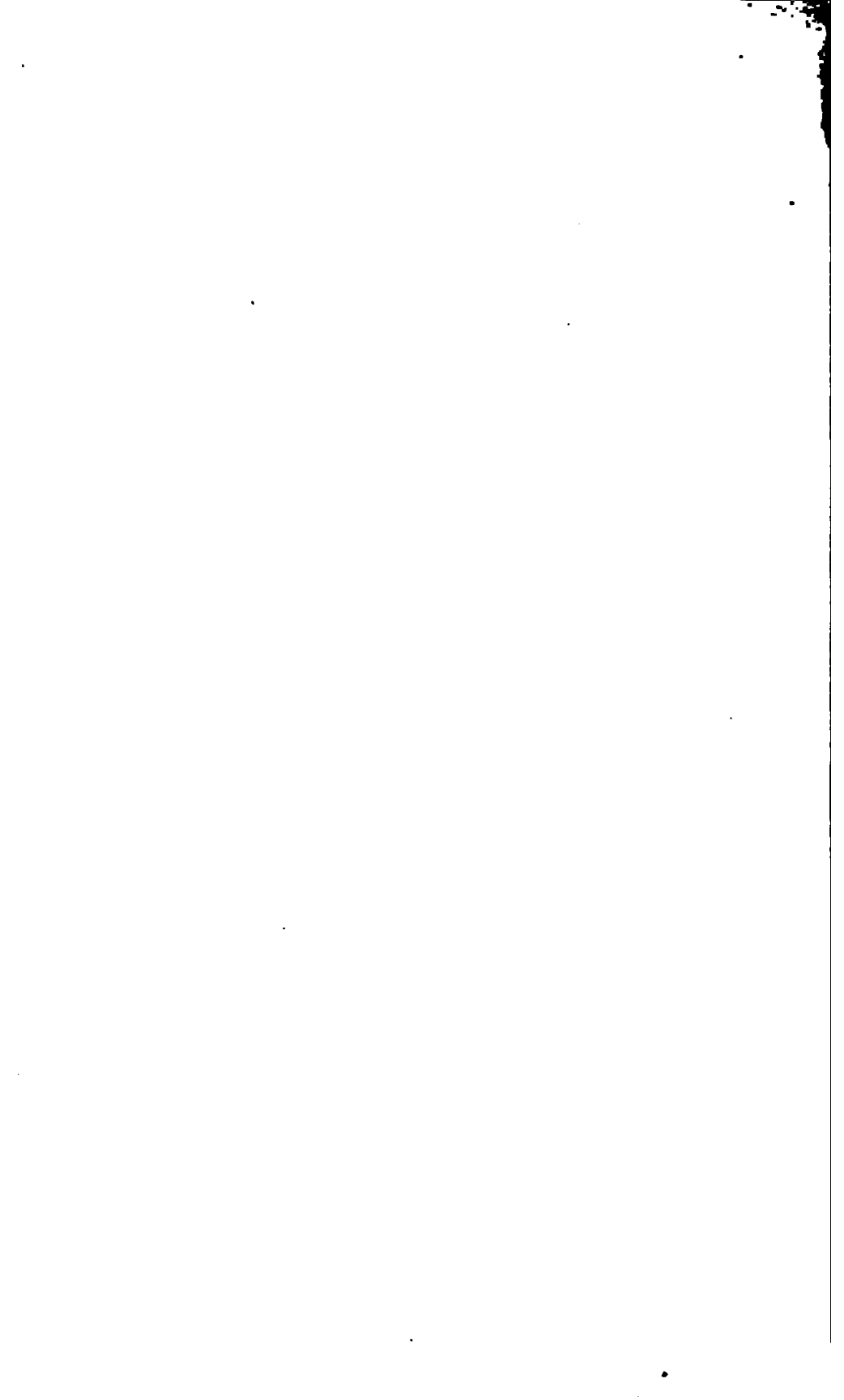
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U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
PUBLISHED BY THE BUREAU

# MATERNAL MORTALITY

FROM ALL CAUSES CONNECTED  
WITH CHILD BIRTH

IN THE UNITED STATES  
AND CERTAIN OTHER  
COUNTRIES

BY  
CHARLES E. FARRIS, M.D.

AMERICAN PUBLIC HEALTH ASSOCIATION  
WASHINGTON, D. C.



AMERICAN PUBLIC HEALTH ASSOCIATION  
WASHINGTON, D. C.

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U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU

JULIA C. LATHROP, Chief

# MATERNAL MORTALITY

FROM ALL CONDITIONS CONNECTED  
WITH CHILDBIRTH

IN THE UNITED STATES  
AND CERTAIN OTHER  
COUNTRIES

BY

GRACE L. MEIGS, M. D.

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MISCELLANEOUS SERIES No. 8

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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,  
*Washington, September 25, 1916.*

SIR: I transmit herewith a report entitled "Maternal Mortality from all Conditions Connected with Childbirth in the United States and Certain Other Countries," by Dr. Grace L. Meigs, in charge of the hygiene division of this bureau. This report has been prepared because the bureau's studies of infant mortality in towns and rural districts reveal a connection between maternal and infant welfare so close that it becomes plain that infancy can not be protected without the protection of maternity.

In this study Dr. Meigs undertakes to do no more than to assemble and interpret figures already published by the United States Bureau of the Census and by the statistical authorities of various foreign countries, and to state accepted scientific views as to the proper care of maternity. She points out clearly that maternal mortality is in great measure preventable, that no available figures show a decrease in the United States in recent years, and that certain other countries now exhibit more favorable rates. This report reveals an unconscious neglect due to age-long ignorance and fatalism. It is earnestly believed that whenever the public realizes the facts it will awake to action and that adequate provision for maternal and infant welfare will become an integral part of all plans for public health protection.

The generous assistance of the United States Bureau of the Census in the preparation of this report is gratefully acknowledged.

Dr. Meigs desires that special mention be made of the assistance of Miss Emma Duke, head of the statistical division of the Children's Bureau, and of Miss Viola Paradise, research assistant in the division of hygiene.

Respectfully submitted.

JULIA C. LATHROP,  
*Chief of Bureau.*

HON. WILLIAM B. WILSON,  
*Secretary of Labor.*



## **MATERNAL MORTALITY FROM ALL CONDITIONS CONNECTED WITH CHILDBIRTH.**

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### **SUMMARY.**

In 1913 in this country at least 15,000 women, it is estimated, died from conditions caused by childbirth; about 7,000 of these died from childbed fever, a disease proved to be almost entirely preventable, and the remaining 8,000 from diseases now known to be to a great extent preventable or curable. Physicians and statisticians agree that these figures are a great underestimate.

In 1913 the death rate per 100,000 population from all conditions caused by childbirth was little lower than that from typhoid fever; this rate would be almost quadrupled if only the group of the population which can be affected, women of childbearing age, were considered.

In 1913 childbirth caused more deaths among women 15 to 44 years old than any disease except tuberculosis.

The death rate due to this cause is almost twice as high in the colored as in the white population.

Only 2 of a group of 15 important foreign countries show higher rates from this cause than the rate in the registration area of the United States. The rates of 3 countries, Sweden, Norway, and Italy, which are notably low, show that low rates for these diseases are attainable.

The death rates from childbirth and from childbed fever for the registration area of this country apparently are not falling to any great extent; during the 13 years from 1900 to 1913 they have shown no demonstrable decrease. These years have been marked by a revolution in the control of certain other preventable diseases, such as typhoid, diphtheria, and tuberculosis. During that time the typhoid rate has been cut in half, the rate from tuberculosis markedly reduced, and the rate from diphtheria reduced to less than one-half. During this period there has been a decrease in the death rate from childbirth per 1,000 live births in England and Wales, Ireland, Japan, New Zealand, and Switzerland.

These facts point to the need in this country and in foreign countries of higher standards of care for women at the time of childbirth.

The low standards at present existing in this country result chiefly from two causes: (1) General ignorance of the dangers connected

with childbirth and of the need for proper hygiene and skilled care in order to prevent them; (2) difficulty in the provision of adequate care due to special problems characteristic of this country. Such problems vary greatly in the city and in the rural districts. In the country inaccessibility of any skilled care is a chief factor.

Improvement will come about only through a general realization of the necessity for better care at childbirth. If women demand better care, physicians will provide it, medical colleges will furnish better training in obstetrics, and communities will realize the vital importance of community measures to insure good care for all classes of women.

## **PART I. GENERAL DISCUSSION.**

### **STATISTICS RELATING TO CHILDBIRTH IN THE UNITED STATES AND IN CERTAIN FOREIGN COUNTRIES.**

#### **Introduction.**

For the last two decades civilized countries have been absorbed in the problem of preventing the enormous and needless waste of human life represented by their infant death rates. The importance of this problem has been felt more keenly in the last two years in the countries now at war; in these countries the efforts toward saving the lives of babies have redoubled since the war began. Side by side with this problem, another, which is only of late finding its true place, is that of the protection of the lives and health of mothers during their pregnancy and confinement. This is a question so closely bound up with that of the prevention of infant mortality that the two can not be separated.

It is now realized that a large proportion of the deaths of babies occur in the first days and weeks of life, and that these deaths can be prevented only through proper care of the mother before and at the birth of her baby. It is also realized that breast feeding through the greater part of the first year of the baby's life is the chief protection from all diseases; and that mothers are much more likely to be able to nurse their babies successfully if they receive proper care before, at, and after childbirth. Moreover, in the progress of work for the prevention of infant mortality it has become ever clearer that all such work is useful only in so far as it helps the mother to care better for her baby. It must be plain, then, to what a degree the sickness or death of the mother lessens the chances of the baby for life and health.

This question has also another side. Each death at childbirth is a serious loss to the country. The women who die from this cause are lost at the time of their greatest usefulness to the State and to their families; and they give their lives in carrying out a function which must be regarded as the most important in the world.

Questions then of the most vital interest to the whole Nation are these: How are the lives of the mothers in this country and other countries being protected? To what degree are the diseases caused by pregnancy and childbirth preventable? If preventable, how far are they being prevented in this country? Has there been the same great decrease in the last few years in sickness and death from these causes as that which has marked the great campaigns against

other preventable diseases such as typhoid, tuberculosis, or diphtheria? How do the conditions in the United States compare with those in other countries?

In the following report the attempt has been made to derive answers to these questions from the official records of this country and of foreign countries.

### **Are the diseases caused by pregnancy and confinement preventable diseases?**

These diseases<sup>1</sup> fall naturally into two groups, which differ considerably as to the degree to which they are preventable:

1. Childbed fever, or puerperal septicemia (an infection arising in connection with miscarriage or confinement), which is to a great degree a preventable disease.

2. All other diseases and complications caused by pregnancy and confinement, including conditions varying very much in the degree to which they can be prevented or cured.

*Puerperal septicemia (childbed fever).*—The fact is now well known that puerperal septicemia, or childbed fever, is in reality a wound infection, similar to such an infection after an accident or an operation, and that it can be prevented by the same measures of cleanliness and asepsis which are used so universally in modern surgery to prevent infection. The proof of the nature of this disease is one of the tremendous results of the scientific discoveries which were made in the latter part of the nineteenth century.

During the early part of that century childbed fever was one of the greatest hospital scourges known. It occurred also in private practice; but in hospitals where there was great opportunity for the spreading of infection the death rate from this disease was appalling. The average death rate in hospitals in all countries was 3 to 4 per cent of all women confined; sometimes it reached 10 to 20 per cent and even over 50 per cent during short periods of epidemics.<sup>2</sup> In the face of this terrific mortality many obstetrical hospitals were closed. Commissions were appointed to investigate the cause of these epidemics, and medical congresses devoted sessions to the discussion of the problem. In 1843 Oliver Wendell Holmes, and in 1847 Semmelweis, published articles stating the theory that this fever was similar to a wound infection and was due chiefly to the carrying of infectious material on the hands of attendants from one case to another. The

<sup>1</sup> Throughout this report when reference is made to causes of death the term "childbirth" will be used as synonymous with "all diseases caused by pregnancy and confinement"; and each of these terms will be used as being the sum of the two groups, "puerperal septicemia" and "all other diseases caused by pregnancy and confinement." It will be noted that diseases of the breast during lactation are included in the latter group. For a fuller discussion of these causes of death, and the titles of the International List of Causes of Death to which they correspond, see p. 29.

<sup>2</sup> Williams, J. W. "Obstetrics and animal experimentation." *Defense of Research Pamphlet XVIII*, Amer. Med. Assn., Chicago, 1911, pp. 5-19.



same ideas had been published much earlier but had not received attention.

At the time of the publications of Holmes and Semmelweiss it was not known that the infection of wounds is caused by the action of bacteria or germs. This discovery followed the pioneer discovery of living bacteria causing fermentation, made by Pasteur about 1863, which has revolutionized all surgery and preventive medicine.

In 1867 Lister began to apply to surgery the work of Pasteur; he taught that wound infection at operation could be prevented by the destruction of bacteria through disinfection or antisepsis. Though these methods have been supplemented in later years by the better methods of absolute surgical cleanliness or asepsis, they represented at that time a great advance.

About 1875 Lister's methods began to be generally accepted and applied in hospitals to the prevention of infection at childbirth. This movement gained great support in 1879 when Pasteur proved definitely that childbed fever is caused by bacteria.

Gradually the methods of antisepsis or disinfection and later the better methods of asepsis were accepted in obstetrical hospitals; and at the same time the mortality, once so high, dropped enormously. At present the death rate from puerperal septicemia among cases delivered in hospitals is extremely low. Williams says: "At the present time it is safe to say that in well-regulated hospitals the mortality from puerperal infection is less than 0.25 per cent. This is in great contrast with the average mortality of 3 to 4 per cent observed [in hospitals] throughout the world prior to the introduction of anti-septic methods, and means that only 1 woman now dies as compared with 15 or 20 formerly."<sup>1</sup>

This experience in hospitals has proved definitely that puerperal septicemia is to a very large degree preventable. One fact, however, complicates the whole question and makes it impossible to say that the disease is in all cases absolutely preventable, namely, that a very small number of cases develops even under conditions of the best hospital or private care, when every method for avoiding infection has been used. This fact has led to much controversy. In general obstetricians of the greatest experience believe that a small number of cases of infection after childbirth may develop from bacteria which were already in the body of the patient before confinement; but that in the main such cases are of mild severity and that only a few fatal cases are due to this cause. Another point which must be borne in mind is that, in a certain number of cases, women may infect themselves through improper hygiene during pregnancy or just before or at confinement. Therefore the teaching of proper hygiene is an essential part of the work for the prevention of infection.

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<sup>1</sup> Williams, J. W. *Supra cit.*, p. 19.

To sum up, experience has shown that by far the major part of all serious cases of infection at childbirth may be prevented by the application of such principles of hygiene and of strict surgical cleanliness as are now established beyond question.

*All other diseases caused by pregnancy and confinement.*—The diseases and complications included under this heading are those given on page 30 as being included under "Other puerperal accidents of pregnancy and labor."

A definite statement such as that made above regarding the preventability of puerperal septicemia can not be made about this second group of diseases, which includes many different conditions. However, it is a fact well proved in practice that a large number of these complications can be prevented through proper hygiene and supervision during pregnancy and through skilled care at labor. Certain other complications which can not be prevented can be detected before serious harm is done, and treatment can be given which will save the mother's life. We can see this more clearly if we consider as examples two of the most important complications.

Puerperal albuminuria and convulsions, called also eclampsia, or toxemia of pregnancy, is a disease which occurs most frequently during pregnancy but may occur at or following confinement. It is a relatively frequent complication among women bearing their first children. When fully established its chief symptoms are convulsions and unconsciousness. In the early stages of the disease the symptoms are slight puffiness of the face, hands, and feet; headache; albumen in the urine; and usually a rise in blood pressure. Very often proper treatment and diet at the beginning of such early symptoms may prevent the development of the disease; but in many cases where the disease is well established before the physician is consulted, the woman and baby can not be saved by any treatment. In the prevention of deaths from this cause it is essential, therefore, that each woman, especially each woman bearing her first child, should know what she can do, by proper hygiene and diet, to prevent the disease; that she should know the meaning of these early symptoms if they arise, so that she may seek at once the advice of her doctor; and that she should have regular supervision during pregnancy, with examination of the urine at intervals.

Some obstruction to labor in the small size or abnormal shape of the pelvic canal causes many deaths of mothers included in the class "other accidents of labor" and also many stillbirths. If such difficulty is discovered before labor, proper treatment will in almost all cases insure the life of mother and child; if it is not discovered until labor has begun, or perhaps until it has continued for many hours, the danger to both is greatly increased. Every woman, therefore, should have during pregnancy—and above all during her first preg-

nancy—an examination in which measurements are made to enable ~~the physician~~ to judge whether or not there will be any obstruction. A case in which a complication of this kind is found requires the greatest skill and experience in treatment,<sup>1</sup> but without it the life and health of the mother are almost always

lost. A few examples will suffice. In the same way it could be said with regard to all the other complications of pregnancy and those which can not be prevented can be treated successfully in many cases if detected in time.

It is regarded, then, as a generally accepted fact that all deaths connected with childbearing is, to a certain and considerable extent, preventable, through the application of the scientific knowledge which is now well established. The next questions that arise are these diseases being prevented in the United States? How many deaths do they cause each year? What are the rates from these causes, and are they decreasing or increasing? The statistics gathered by the United States Bureau of Census have been studied for answers to these questions.

There are other equally important questions to which these figures do not give answers. In addition to the number of deaths and the rate, it is important to know how much illness is caused by complications of pregnancy and confinement. How many women do become ill for months or years? Undoubtedly the health of these women affects enormously the welfare of their children. Unfortunately, many of these questions can not be answered; puerperal septicemia is not a reportable disease in this country as it is in many others. We can only remember that for each woman who died there are surely many who were ill for days, weeks, or months, but who finally recovered.

The following pages give a brief summary of the data, published by the United States Bureau of the Census, dealing with deaths from childbirth. These are discussed in further detail in other sections of the report.

### Reliability of data.

The statement is frequently made that all statistics on this subject are incomplete. This is undoubtedly true with regard to the figures available in each country. A detailed discussion of the many sources of error in the statistics of the United States and of foreign countries on this subject will be found in another section, beginning on page 34.

<sup>1</sup> The public must be taught that the conduct of labor complicated by a moderate degree of pelvic contraction is quite as serious as a case of appendicitis, and that its proper management requires the highest degree of judgment and skill, while eclampsia or placenta prævia are even more serious.—Williams, J. W. "The midwife problem and medical education in the United States." *Trans. Amer. Assn. for Study and Prevention of Infant Mortality*, 1911, p. 189.

From that discussion several conclusions may be drawn:

1. Though the figures of the number of deaths from puerperal septicemia and from all other diseases connected with childbirth are certainly incomplete, yet they are reliable as far as they go; they may be accepted as a statement of the minimum number of deaths which have actually occurred as a result of these diseases.

2. All conclusions as to comparative death rates in various years and in various countries can be made only with caution and by bearing in mind the many statistical pitfalls connected with such comparisons.

With a full understanding of the limitations of the figures available, it has seemed worth while to publish the following figures of the deaths in the United States due to childbirth.

#### Number of deaths in the United States from childbirth.

In 1913 in the "death-registration area"<sup>1</sup> of the United States 10,010 deaths were reported as due to conditions caused by pregnancy and childbirth. Of these deaths, 4,542 were reported as caused by puerperal septicemia or childbed fever.

Using the death-registration area as a basis, we are justified in estimating that in 1913 in the whole United States 15,376 deaths were due to childbirth, and 6,977 of these were due to childbed fever. As will be shown later, these figures are without doubt a gross underestimate. As it is, they are striking enough—almost 7,000 deaths in one year in this country due to childbed fever, a disease to a large degree easily preventable; and over 8,000 due to the other diseases caused by pregnancy and confinement, most of which are preventable or curable by means well known to science.

#### Death rates in the United States from childbirth.

The death rate from all diseases caused by pregnancy and confinement in 1913 in the registration area was 15.8 per 100,000 population (which includes all ages and both sexes). The death rate from puerperal septicemia was 7.2.

These figures, however, mean little to us unless we compare them with the death rates from other preventable diseases. In the same year and area the typhoid rate was 17.9 per 100,000 population; the rate from diphtheria and croup 18.8. The highest death rate from any one disease was that from tuberculosis, 147.6 per 100,000 population. Any such comparison with the rates from diseases to which both sexes and all ages are liable is of course very misleading; but in spite of that fact it is interesting to note that typhoid fever, the disease

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<sup>1</sup> The death-registration area comprises the States and cities in which the registration of deaths is returned as fairly complete.—U. S. Census. Mortality Statistics, 1911, p. 9. It is estimated that in 1913 the death-registration area included 65.1 per cent of the population of the United States. (See Table I, p. 49.)

against which so great an amount of effort is now directed, has a rate at present but 2 per 100,000 population higher than that from the diseases caused by pregnancy and confinement.

*Death rates per 100,000 women.*—The death rates from childbirth are approximately doubled when worked on the basis of 100,000 women. This will be seen when Tables IV and III (p. 50) are compared. The former gives for the period 1900 to 1910, the annual death rates per 100,000 women in the group of 11 States which were in the death-registration area in 1900, the latter the death rates per 100,000 population in the same group of States for the same period. It is evident that the rates in Table IV for each year are slightly more than twice those in Table III for the same year.

*Death rates per 100,000 women of childbearing age.*—Again, a much higher but a more accurate death rate from these diseases is found when the basis taken is the group which alone is affected by these diseases—women of childbearing age. When the rate is based not upon 100,000 population of both sexes and all ages but upon 100,000 women 15 to 44 years of age, the rate as ordinarily given is multiplied several times.

In 1900,<sup>1</sup> the only year for which the rates can be computed, the death rate in the registration area per 100,000 women 15 to 44 years of age from all diseases of pregnancy and confinement was 50.3; from puerperal infection, 21.6. (See p. 32.) The corresponding rates for the same year per 100,000 population were 13.1 and 5.6. In this year, therefore, the rates are almost quadrupled when based on that group of the population which alone can be affected by these diseases.

Moreover, the death rates as ordinarily given per 100,000 population conceal the fact that the diseases of pregnancy and childbirth are indeed among the most important causes of death of women between 15 and 44 years of age; the actual number of deaths shows this to be the case. In 1913 in the registration area these diseases caused more deaths than any other one cause of death except tuberculosis. In that year there were, among women 15 to 44 years of age, 26,265 deaths from tuberculosis; 9,876 deaths from the diseases of pregnancy and confinement; 6,386 from heart disease; 5,741 from acute nephritis and Bright's disease; 5,065 from cancer; and 4,167 from pneumonia. Other diseases, such as typhoid, appendicitis, and the infectious diseases show far fewer deaths. (See Table V, p. 51.)

*Death rates per 1,000 live births.*—This rate, as will be shown repeatedly throughout the report (see p. 32), gives a far clearer picture of the actual risk of childbirth than do any of the rates so far considered. This rate can be given only for one year, 1910, and only for the provisional birth-registration area for that year. The rate from all diseases caused by pregnancy and confinement is 6.5, from puer-

<sup>1</sup> Census year ending May 31.

peral septicemia, 2.9, and from all other diseases of pregnancy and confinement, 3.6 per 1,000 live births. That is, in this area for every 154 babies born alive one mother lost her life. (See Table VI, p. 52.)

### Is the death rate from childbirth falling?

Has there been in the last few years any decrease in the death rates from puerperal septicemia and from other diseases caused by pregnancy and confinement? The general opinion of the medical profession and of the laity is that these death rates, and especially the rate from puerperal septicemia, are fast decreasing. The fact that hospital epidemics of puerperal septicemia are now things of the past is thought to be evidence that deaths from this disease are now rare. On the other hand, many obstetricians of wide experience believe that outside of hospitals there has been no great decrease in the death rate from puerperal septicemia.

Dr. Williams,<sup>1</sup> professor of obstetrics, Johns Hopkins University, believes that there has been no great improvement in this country; Dr. Webster,<sup>2</sup> professor of obstetrics, Rush Medical College, University of Chicago, and Dr. Powell<sup>3</sup> hold the same opinion; Dr. De Lee,<sup>4</sup> professor

<sup>1</sup> In private practice it is doubtful whether the results are materially better to-day than they were before the introduction of antiseptic methods, for the reason that the doctrines of asepsis have not yet permeated the rank and file of medical men, much less of midwives, to whose care is committed a very large proportion of obstetrical cases. Though, at the same time, it must be admitted that we rarely hear of outbreaks of puerperal infection such as are mentioned in the historical work of Hirsch, who gives the particulars of 216 epidemics occurring between the years 1652 and 1862.

Boehr stated in 1875 that 363,324 women had died from puerperal infection in Prussia during the preceding 60 years, and calculated that every thirtieth married woman eventually perished from it; while Ehlers contended that outside of the well-regulated hospitals the results were equally bad in 1900. Furthermore, Fromme stated, in 1910, that at least 5,000 women succumb each year in Prussia to this preventable malady.

Bacon, in an article based upon the records of the health department of Chicago, showed that for the 40 years prior to 1896 puerperal infection was assigned as the cause of death in 12.75 per cent of the women dying between the ages of 20 and 50 years, varying between 20 per cent in 1873 and 7.3 per cent in 1895. Similar results were reported by Ingerslev, who stated that, even at the present time in Denmark, with the single exception of tuberculosis, puerperal infection is the most frequent cause of death in women during the childbearing period.

The investigations of Boxall, Byers, and Lea show a similar condition in England, where it may be said that outside of the lying-in hospitals this preventable scourge claims as many and perhaps more victims than it did 20 or even 40 years ago.

Moreover, in trying to determine the frequency of puerperal infection, one can not be guided altogether by the mortality statistics, inasmuch as the largest proportion of these cases do not end fatally. On the other hand, anyone who deals much with gynecological patients can not fail to be impressed with the very large proportion whose troubles have originated from febrile affections during the puerperium, which in many instances were clearly due to the neglect of aseptic precautions on the part of the obstetrician or midwife.—Williams, J. W. *Obstetrics*, 1913, pp. 900, 901.

<sup>2</sup> It is the general impression that there has been a marked diminution in the mortality of puerperal sepsis since the introduction of antiseptics. This is probably true only as regards hospital practice. \* \* \* As regards private practice, it is doubtful if there has been much diminution in mortality, either in Europe or America.—Webster, J. C. *A Text-book of Obstetrics*, 1903, p. 640.

<sup>3</sup> I am quite sure it is the belief of all who have given attention to this subject, that the mortality from puerperal infection has been diminished little if any in private practice.—Powell, H. H. "Mortality from puerperal infection," *Surgery, Gynecology and Obstetrics*, 1906, Vol. III, p. 11.

<sup>4</sup> I do not fear to hazard the statement that 8,000 women die annually in the United States from childbed infections. When one considers that the majority of cases of puerperal infection get well, the conclusion is inevitable that the disease is still—in these modern aseptic and antiseptic times—very prevalent.—De Lee, J. B. *Principles and Practice of Obstetrics*, 1913, p. 870.

of obstetrics, Northwestern University, comments on the great prevalence of puerperal septicemia in spite of our present knowledge of aseptis. Dr. Moran<sup>1</sup> points out the lack of decrease in the figures as given in the census reports, as does also Dr. Davis<sup>2</sup> in a recent volume. Dr. Edgar,<sup>3</sup> professor of obstetrics and clinical midwifery, Cornell University Medical College, on the other hand, believes that there has been a decrease.

We need a definite answer to this question, based on a study of unassailable statistics. Unfortunately the available figures on this subject for this country and foreign countries have many possibilities of error, as will be shown in a later section (see p. 34). The errors have been avoided as far as possible; those which can not be avoided must be considered in reading the following summary. Especially to be remembered is the fact that in recent years great improvement has been made in the registration of deaths from childbirth and childbed fever.

According to the evidence available, these death rates are apparently not decreasing. During the 23 years ending in 1913 in this country no definite decrease in the death rate from the diseases caused by pregnancy and confinement can be demonstrated; nor can any decrease in the death rate from puerperal septicemia be shown.

In the registration area as a whole the death rates have shown no decline in the years between 1890 and 1913. The death rate from all diseases caused by pregnancy and confinement, which was 15.3 in 1890, fell to 13 in 1902, and then with annual fluctuations rose to 16 in 1911; in 1913 the rate was 15.8. The annual average for the period 1901 to 1905 was 14.2; for the period 1906 to 1910, 15.5. (See Table I, p. 49.)

The death rate from all diseases caused by pregnancy and confinement for the group of eight States which have been included in the death-registration area from 1890 to 1913<sup>4</sup> also has shown no decrease during the course of these 23 years. There was a slight fall in the rate for the year 1900 as compared with that for the year 1890, followed by a slight rise. (See Table II, p. 49.) In 1890 the rate was 14.1 per 100,000 population; in 1900, 12.6; in 1913 it was 14.3.

The death rates for a second group of States<sup>4</sup> (those included in the death-registration area since 1900) show between 1900 and 1913 a

<sup>1</sup> Moran, J. F. "The endowment of motherhood," Jour. Amer. Med. Assn., 1915, Vol. LXIV, p. 122.

<sup>2</sup> It is probable that very few physicians realize that with the great progress of preventive medicine and aseptic surgery that there has not been a similar increase in the safety of maternity.—Davis, C. H. *Painless Childbirth, Eutocia, and Nitrous Oxid-Oxygen Analgesia*, 1916, p. 62.

<sup>3</sup> It is very difficult to estimate the frequency of puerperal infection outside of hospitals \* \* \* but it is undoubtedly much less than it used to be.—Edgar, J. C. *The Practice of Obstetrics*, 1903, p. 752.

<sup>4</sup> Selected for study because good methods of death registration may be assumed to have become established, and also because comparisons of the rates of such a group of States are not open to the error due to the changing character of the registration area.

slight increase, from 12.9 to 14.9, with the high point 15.5 in 1911. (See Table III, p. 50). These rates are more fully discussed on page 38.

The death rates from puerperal septicemia or childbed fever during these years in each group of States have run parallel with those from the whole group of diseases connected with childbirth; they, too, have shown practically no change in 13 years.

It is probable that the improvement in reporting deaths from childbirth may account for the apparent rise in the rates since 1900; it may also perhaps conceal a slight improvement in actual conditions since that time; but it is safe to say that any marked decrease in the actual death rate from childbirth during the last 13 years could not have been masked by this error.

In these years what has been the change in the death rates from other preventable diseases? These death rates tell a very different story from that of the rates from childbirth. They give a bare outline of the remarkable achievements of modern medicine in the prevention of certain diseases.

DIAGRAM I.—DEATH RATES PER 100,000 POPULATION FROM TYPHOID, DIPHTHERIA AND CROUP, AND DISEASES CAUSED BY PREGNANCY AND CONFINEMENT IN THE DEATH-REGISTRATION AREA OF THE UNITED STATES, 1900 TO 1913.

RATE.

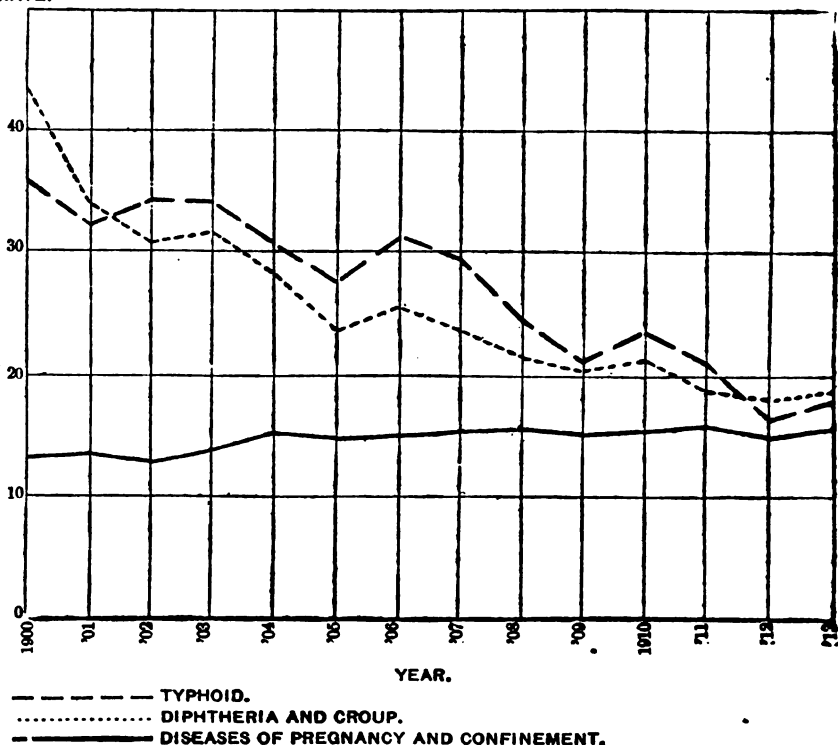
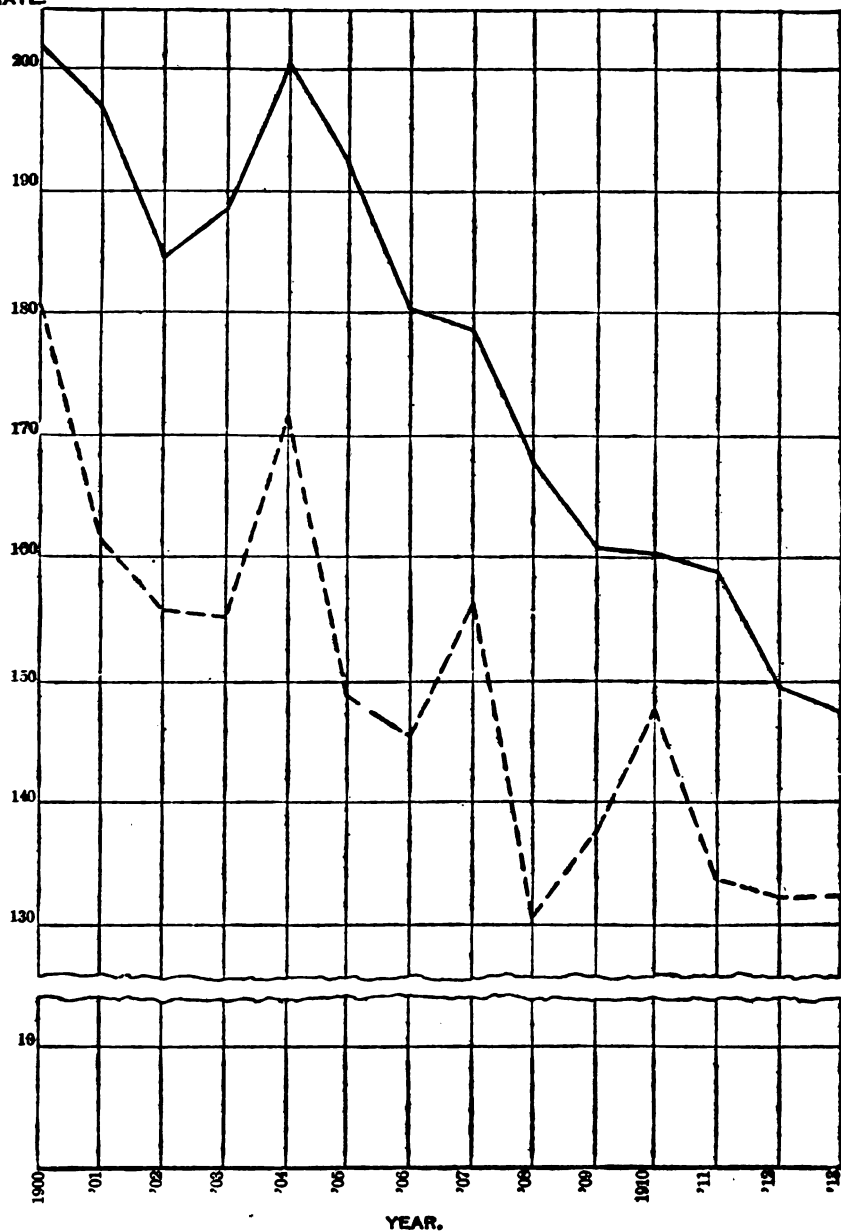




DIAGRAM 2.—DEATH RATES PER 100,000 POPULATION FROM TUBERCULOSIS AND PNEUMONIA IN THE DEATH-REGISTRATION AREA OF THE UNITED STATES, 1900 TO 1913.

RATE.



————— TUBERCULOSIS.  
----- PNEUMONIA.

Between 1890 and 1913 the death rate from typhoid fever in the death-registration area fell from 46.3 to 17.9; that from diphtheria and croup from 97.8 to 18.8; from tuberculosis from 252 to 147.6; from pneumonia from 186.9 to 132.4; from diarrhea and enteritis under 2 years from 139.1 to 75.2. (See Table VII, p. 53.)

If we consider only the 13 years since 1900, for which we have annual reports, the changes are just as startling. In that time the death rate from typhoid fever has been cut in half; that from diphtheria and croup has dropped to less than half; those from tuberculosis and pneumonia have both shown a marked fall. These changes, together with the lack of change in the death rates from the diseases caused by pregnancy and childbirth, are shown graphically in diagrams 1 and 2.

#### Death rates from childbirth in urban and rural districts.

Besides the questions applying to the death rates of the country as a whole, there are further questions which it would be interesting to answer from the data given by official figures. Is the rate higher in the cities than in rural districts? Does a comparison of the rates of different sections of the country reveal any significant facts? Is there any difference in rate among different groups of the population?

No figures,<sup>1</sup> unfortunately, are available for the death rates from these diseases in what is generally understood as the rural portion of this country; that is, among the population scattered in districts outside of even the smallest towns and cities. In view of the fact that standards of obstetrical and prenatal care differ so widely in these rural districts from those in large cities a comparison of the rates would have been extremely significant.

The death rates for the group of cities of 8,000<sup>2</sup> or more inhabitants in the registration States<sup>3</sup> have been studied, as contrasted with the death rates of the smaller cities, towns, and rural districts classed together. The rates in each year are higher for the larger cities of the registration States than for the smaller cities and rural districts. (See Table VIII, p. 53.) Part of this difference may be due to greater incompleteness of the returns from the second group. Further than this, many factors may be involved in the higher rate in the larger

<sup>1</sup> In the publications of the Bureau of the Census on Mortality Statistics figures are given for the population classified into urban and rural or of cities and rural districts. For the years 1900 to 1909 urban is defined as including the population of all cities of 8,000 or more inhabitants at the census of 1900; rural as including that of all cities and towns of less than 8,000 inhabitants, as well as of the districts outside of any cities, towns, or villages. For the years 1910 to 1913 the division is made between cities having a population of 10,000 or more in 1910 and those cities having less than 10,000 inhabitants, together with rural districts.

<sup>2</sup> Ten thousand inhabitants, 1910 to 1913.

<sup>3</sup> It has been thought better to compare the urban and rural rates in the group of registration States in each year rather than to compare these rates for the whole registration area as constituted in each year. As the registration area includes cities in several States of which the smaller towns and rural districts are not included, the latter comparison would seem to be scarcely fair.

cities. While some of the larger cities afford better provision for obstetrical and prenatal care than do the smaller cities and rural districts, this is not true of all; moreover, the larger cities probably show a much higher rate among the less favored than among the more favored groups of their inhabitants. Overcrowding, overwork, low incomes, ignorance of the need for good obstetrical care and how it can be obtained may all play their part in producing this high rate in the larger cities.

The figures do not show a decrease in the death rates from childbirth in the larger cities in recent years. The death rates of the whole group of cities of 8,000<sup>1</sup> or more inhabitants in the registration States for the years 1900 to 1913 (see Table VIII, p. 53) show no decline. The rate in 1900 was 14.9; in 1913, 17.2.

The rates from childbirth for the same period in a group of 7 large cities have been studied. (See Table IX, p. 54.)

The rates for New York City alone show a definite and steady decline; in 1905 the rate per 100,000 inhabitants was 20.3; in 1913, 14.1.

The rates of Boston, Buffalo, Detroit, Jersey City, and Washington show wide annual fluctuations, but no general tendency to increase or decrease. The rate of Newark, on the other hand, shows an increase.

#### Death rates from childbirth in different States.

The death rates of only 11 States (including the District of Columbia) can be studied through a period of time (1900 to 1913) long enough to justify any conclusions. These States, unfortunately, do not represent any widely different sections of the country, as they include only the New England States, two Middle Atlantic States (New York and New Jersey), the District of Columbia, and two North Central States (Indiana and Michigan). The western and southern sections of the country are unrepresented.

Though the rates for each State vary considerably from year to year, it will be noted that certain States show high average rates; among these are the District of Columbia, Michigan, and Rhode Island, whose rates are 17.6, 17.1, and 16.8, respectively. (See Table X, p. 54.) Other States show comparatively low average rates; for example, New Hampshire (11.2) and Maine (11.8). It seems premature at this time to draw any conclusions as to the cause of these differences in rates in different States. When the rates are available for all sections of the country, a comparison of rates for different large sections presenting similar problems will be very useful.

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<sup>1</sup> Ten thousand inhabitants, 1910 to 1913.

**Death rates from childbirth of white and colored population.**

No facts brought out in this study are as striking as the difference in rates from childbirth of the white and colored population of the death-registration area. In some cases the rates for the colored population are almost double those for the white. Table XI, page 56, which gives the rates so divided, demonstrates this difference. In 1913 the death rate from all diseases caused by pregnancy and confinement was 15.2 per 100,000 white population and 26.1 per 100,000 colored. In the same year the rate from puerperal septicemia was 6.9 for the white population and 11.5 for the colored. A similar relation is shown by the rates for each year from 1910 to 1913. Although the rates can be given only for four years, and are based on small figures, yet they show differences so marked that they picture without doubt a very great difference in standards of care at childbirth in these two groups. When all the Southern States are included in the death-registration area the magnitude of this problem undoubtedly will be shown by the death rates from childbirth in these States. At present but a small percentage of the colored population of the United States is represented by the figures available.

**Comparison of the average death rates from childbirth in certain foreign countries and in the United States.**

Are the death rates from these diseases in the death-registration area of the United States higher or lower than those in other civilized countries? Have these rates in other countries been falling or rising in the last 13 years, while the rates of this country have been apparently stationary? These questions, like all those of comparative international statistics, are of immense interest, but they involve many difficulties and sources of error. These are discussed on page 41. They should be considered in reading the following summary.

In order to make possible a comparison of the death rates from these causes for 15 foreign countries with those for the United States, an average rate has been computed for the years 1900 to 1910<sup>1</sup> for each of the countries, using the same method as that in use in the United States. When the 16 countries studied are arranged in order, with the one having the lowest rate first, the death-registration area of the United States stands fourteenth on the list. (See Table XII, p. 56.) Only two countries, Switzerland and Spain, have higher rates; many of the countries, however, show rates differing but little from that of the United States. Markedly low rates are those of Sweden (6), Norway (7.8), and Italy (8.9); a strikingly high rate is that of Spain (19.6).

The death rate from childbirth per 1,000 live births is not available for the death-registration area of the United States, but can be given

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<sup>1</sup> Or for that portion of this period for which figures are available.

only for the small number of States and cities included in the provisional birth-registration area and for one year, 1910. (See p. 31.) This rate, 6.5, is considerably higher than that for 1910 of any of the countries studied. When the average rates for a number of years of the 15 countries are reckoned per 1,000 live births and arranged in order, it will be seen that the same group of countries—Sweden, Italy, and Norway—shows the lowest rates. (See Table XIII, p. 56.) Spain in this table shows the rate which is next to the highest, while Belgium now has the highest rate. For a comparative study of the rates of these countries the rates per 1,000 live births give undoubtedly the clearest picture of the actual conditions.

These rates show a wide variation. While in Sweden but one mother is lost for every 430 babies born alive, in Belgium one mother dies for every 172 babies, and in Spain one for every 175 babies born alive. The rates in Belgium and Spain are two and a half times as high as the rate in Sweden.

Far more significant than a comparison of actual death rates of various countries is a comparison of the changes which have occurred in these death rates in each country in recent years. England and Wales, Ireland, Japan, New Zealand, and Switzerland have shown a decrease in the death rate per 1,000 live births from all diseases caused by pregnancy and confinement; but, in this group, only in England and Wales and in Ireland has the death rate from puerperal septicemia decreased; in the other three countries this rate has remained practically the same, though the total rate has decreased.

In Australia, Belgium, Hungary, Italy, Norway, Prussia, Spain, and Sweden both the rate from childbirth and that from puerperal septicemia remained almost stationary during the periods studied.

The total rate for Scotland shows a definite increase, though the rate from puerperal septicemia has decreased. (See Table XVI, p. 66.)

### Conclusions.

In the foregoing pages the attempt has been made to draw, from available statistics, answers to certain important and urgent questions relating to the hazards of childbirth in this country and in other countries. It has been shown that a large number of women die year after year in this country from childbed fever, a disease proved over 40 years ago to be almost entirely preventable; and that a still larger number die from other conditions connected with childbirth which are known to be to a large degree preventable or curable. The proportionately small number of women lost from these causes in certain foreign countries demonstrates the needlessness of the greater part of our losses. There is no evidence, moreover, of any great advance made during the last 13 years in this country in the prevention of disease and death due to childbirth, though the

same period has been marked by a notable decrease in the death rates of certain other diseases which have been proved preventable.

What is the cause of these conditions in this country? At the root of the matter, apparently, lie two chief causes: First, general ignorance of the dangers connected with childbirth and the need of skilled care and proper hygiene in order to prevent them; second, such difficulties related to the provision of proper obstetrical care as are characteristic of conditions in this country.

A general realization of certain of the fundamental facts related to the bearing of children has only begun; this function has always been looked upon with a mixture of ignorance and fatalism. The hazards to health and life connected with childbirth have been either ignored or accepted as unavoidable accidents. By most people childbirth is regarded as an entirely normal process, and, happily, in the great majority of cases this is true. But the figures given in this report show that it is not true of all. Each year there is a vast number of normal deliveries, and among them the relatively small but absolutely very large number of complicated cases is lost sight of. On the other hand, most people regard such illness and deaths as do occur as unpreventable. Only very gradually and incompletely are women beginning to realize the simple facts that certain accidents and complications occur in a definite percentage of cases of childbirth, but that almost always these may be avoided or cured if women exercise the proper hygiene during pregnancy, secure proper supervision during that time, and have skilled attendance at labor. Like other essentials of hygiene and preventive medicine these principles are at last becoming public property instead of being the exclusive possession of physicians. But in this case progress has been very slow. Knowledge of the need for good care at childbirth is essential; the lack of such knowledge and of a demand for this care has been, probably, the chief factor in producing the present indifference to this phase of preventive medicine.

The husbands of women bearing children do not realize that money paid for skilled service at childbirth is one of the most necessary family expenditures; hence, obstetrics has become one of the worst paid though one of the most taxing branches of medicine. Dr. Williams<sup>1</sup> speaks of the small fees usually paid for maternity care and says that "doctors who are obliged to live from their practice can not reasonably be expected to give much better service than they are paid for." Naturally enough, the lack of interest of physicians in obstetrics is partly due to this fact. No doubt another reason why many able physicians dislike this branch of practice is the fact that they feel strongly the responsibility assumed in the care of

<sup>1</sup> Williams, J. W. "The midwife problem and medical education in the United States." *Trans. Amer. Assn. for Study and Prevention of Infant Mortality*, 1911, p. 190.

women at childbirth; yet they are frequently called upon to take this responsibility in the face of conditions which they can not control and which threaten the safety of their patients. A conscientious physician does not willingly undertake the conduct of a difficult case of labor outside a hospital and without skilled assistance; but frequently he must do so, either because there is no hospital or trained nurse available, or because the patient and her family are unable or unwilling to pay for the needed help. The physician either must give up the case to an attendant who is less skillful and careful than himself or must take the risk that puerperal septicemia or some other complication may occur. If either follows he has the blame. Altogether a physician has little incentive to specialize and acquire great skill in this branch.

Necessarily the same apparent indifference to the importance of obstetrics is reflected in the courses of many medical colleges. Dr. Williams<sup>1</sup> pointed out in 1911 that in the majority of medical colleges in the United States instruction in this subject was grossly neglected; that graduates from these colleges beginning their practice were totally unprepared to manage any but absolutely normal cases of confinement, and that they were untrained in the practice of the principles of asepsis as applied to this branch. Other papers and discussions in the Transactions of the American Association for Study and Prevention of Infant Mortality have emphasized the same facts. In the five years since the article of Williams was written some improvement in these conditions has undoubtedly taken place, as would be expected in connection with the present remarkable tendency toward the raising of standards of medical education in the United States. However, there is no question that further improvement is greatly needed.

Communities are still to a great extent indifferent to or ignorant of the number of lives of women lost yearly from childbirth; many communities which are proud of their low typhoid or diphtheria rates ignore their high rates from childbed fever. Communities are only beginning to realize that among their chief concerns is the protection of the babies born within their limits, and necessarily also of the mothers of those babies before and at confinement.

The second fundamental cause of the high death rates from childbirth in this country previously spoken of—that is, the difficulty of obtaining adequate care—is seen to depend to a large extent on the first, the general ignorance of need for good care. As women, their husbands, physicians, and communities realize the absolute need of skilled care for the prevention of needless deaths from childbirth, methods for providing such care will be developed. In this development special problems will have to be solved in each type of commu-

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<sup>1</sup> Williams, J. W. *Supra cit.*, p. 182.

nity, and in each section of the country—North, South, East, and West. These problems are different from those of foreign countries. While the methods being employed in such countries for reducing the maternal death rate may be suggestive, special methods adapted to the conditions in this country will probably have to be worked out. Of the greatest value, however, as examples, are pieces of work such as that now being carried on in England and other European countries for maternal and infant welfare, that of the New Zealand Society for the Health of Women and Children, the work of the Victorian Order of Nurses of Canada, and of the mayor of the little French town of Villiers-le-duc.<sup>1</sup>

Certain typical problems, characteristic of especial types of communities in this country, may be outlined briefly. In many of the larger cities excellent prenatal and obstetrical care can be obtained by those who can pay considerable sums for it and who realize its importance sufficiently to be willing to do so. In many cities, also, much progress has been made in the provision, through obstetrical clinics and hospitals, of good prenatal and obstetrical care, free or at low cost, for those who otherwise could not afford it. Yet even in a city well supplied with such clinics the number of women reached is relatively small in comparison with the total number of women who bear their children without adequate care during pregnancy and labor. In many large cities, especially those with a large percentage of foreign or of colored population, the untrained midwife is a much-discussed problem. It is well known, moreover, that women of moderate means, who represent a very large proportion of women bearing children, have, in most modern cities, received least benefit from improvements in standards of prenatal and obstetrical care. In working out plans for decreasing the death rate from childbirth in large cities the interests of this group can not be ignored. The problem must be considered as one which must be solved for all classes in a community; it must be realized that it is a problem of the greatest importance to the community as a whole. A very hopeful tendency is the one shown already in some cities, to look upon such service not as a charity but as a concern of the municipality as truly as the protection of its homes from fire and burglary or its milk and water supply from contamination.

In rural districts the problems are essentially different. In many such districts, especially in the North and West, where pioneer conditions still prevail, the question is not one of good or bad obstetrical care but of the inaccessibility of any care at all at this time. Many women bear their children with no attendant other than the hus-

<sup>1</sup> Rapport sur un Arrêté Municipal pris par M. Morel de Villiers. Bulletin de l'Académie de Médecine. 1904. 3<sup>e</sup> série, Vol. LI, p. 222. Moore, S. G. "The Milroy lectures on infantile mortality and the relative practical value of measures directed to its prevention." Lecture III, Lancet, 1916. Vol. CXC, p. 943.



band, a relative, or a neighbor. The nearest physician may be many miles away, the nearest hospital much farther. The expense of calling a physician must necessarily be great, and usually is not considered justifiable. These women have of course no care during pregnancy; if complications develop they are unforeseen, and help is not available. As help in household tasks is usually unprocureable, many women must take up their work much sooner than they should. It may be urged that in practice it would be quite impossible for women living under rural conditions to be provided with such skilled supervision during pregnancy and such care at and after confinement as are now considered ideal. It certainly is not true, however, that a feasible community plan could not be worked out, if the interest of the community demanded it. Such a plan would necessarily recognize two main problems: (1) The best practical care of normal cases and (2) the detection of abnormal cases and their care.

A unit plan for a rural county would perhaps include:

1. A rural nursing service, centering at the county seat, with nurses especially equipped to discern the danger signs of pregnancy. The establishment of such a service would undoubtedly be the most economical first step in creating the network of agencies which will assure proper care for both normal and abnormal cases. In the rural counties in the United States which already have established nurses, the growth of this work will be watched with the greatest interest.

2. An accessible county center for maternal and infant welfare at which mothers may obtain simple information as to the proper care of themselves during pregnancy as well as of their babies.

3. A county maternity hospital, or beds in a general hospital, for the proper care of abnormal cases and for the care of normal cases when it is convenient for the women to leave their homes for confinement. Such a hospital necessarily would be accessible to all parts of the county.

4. Skilled attendance at confinement obtainable by each woman in the county.

As examples have been chosen the special problems in large cities and in pioneer rural districts. Other types of communities in this country present some of the same problems or others just as urgent. In each community, large or small, the essential problem is the same—how to bring about a general realization of the need for adequate care for each woman at childbirth, and how to secure such care.

This report attempts to open for lay discussion and medical study the subject of the preventable loss of life caused by childbirth in this country. Greater interest in the subject surely will lead to the development of new and successful methods for the prevention of these needless deaths.



## PART II. DETAILED ANALYSIS OF METHODS AND STATISTICAL DATA.<sup>1</sup>

### DISCUSSION OF CERTAIN TERMS AND METHODS USED IN THIS REPORT.

#### International Classification of Causes of Death.

Official mortality statistics are derived from the returns of the causes of the deaths which occur annually. Such a return is made on the death certificate by the attending physician or by some person assumed to be familiar with the facts as regards the cause of death. Before the establishment in 1900 of the International Classification of Diseases and Causes of Death many different methods were used in different countries for the classification of these causes as returned on the certificates. The resultant confusion made difficult or impossible the comparison of the mortality statistics of various countries and led to the proposal of this uniform method of classification, called the "International Classification." Various countries have adopted this system of classification at various times; the United States Bureau of the Census adopted it for use in the calendar year 1900; Great Britain for use in 1911. It is planned to keep this classification up to date through revisions at 10-year intervals. The second revision was made in 1909, and a considerable number of changes were made. Differences in classification between the International List of Causes of Death and the lists in use in countries where the International has not been adopted and between the different revisions of the International List are extremely important, as will be shown, in any comparison of the death rates of various countries and of the same country for a series of years.<sup>2</sup>

In the detailed International List of Causes of Death, second decennial revision, Paris, 1909, the heading "VII—The Puerperal State" includes: (134) Accidents of pregnancy; (135) Puerperal hæmorrhage; (136) Other accidents of labor; (137) Puerperal septichæmia; (138) Puerperal albuminuria and convulsions; (139) Phlegmasia alba dolens, embolus, sudden death; (140) Following childbirth (not otherwise defined); (141) Puerperal diseases of the breast.

The abridged International List of Causes of Death (same revision) makes but two divisions of all the causes of death included in the detailed list under The Puerperal State. These divisions are:

(31) Puerperal septichæmia (puerperal fever, peritonitis), corresponding to number (137) of the detailed list.

<sup>1</sup> Part II will be of interest chiefly to students of statistics.

<sup>2</sup> For a discussion of this subject see Bureau de la statistique générale de la France: *Statistique Internationale du Mouvement de la Population*, 1913, p. 155\*.

(32) Other puerperal accidents of pregnancy and labor, corresponding to Nos. (134), (135), (136), (138), (139), (140), and (141) in the detailed list.

In this report in the discussion of the Census figures and the tables, the classification of deaths according to the International List of Causes of Death, second revision, is used. The names for the different groups have been slightly changed, as it was felt that the names used in the International List give a misleading or obscure impression to those unfamiliar with this list.

In giving deaths and death rates the following terms and classification are used:

(a) *Childbirth, or all diseases caused by pregnancy and confinement*, which is the sum of (b) and (c) and corresponds to VII—The Puerperal State of the detailed International List and to the sum of (31) and (32) of the abridged International List.

(b) *Puerperal septicemia, or childbed fever*, which corresponds to (31) Puerperal septichæmia of the abridged International List, and to (137) Puerperal septichæmia of the detailed International List.

(c) *All other diseases caused by pregnancy and confinement*, which corresponds to (32) Other puerperal accidents of pregnancy and labor of the abridged International List, (134) to (136), and (138) to (141) of the detailed International List.

A few words of explanation may be useful with regard to these diseases and complications. In the term "accidents of pregnancy" the word "accident" is not used in its ordinary sense but in the sense of complications due to the pregnant condition. It includes miscarriage, severe hemorrhage during pregnancy, uncontrollable vomiting, and other complications.

"Puerperal hæmorrhage" includes severe hemorrhage at or following labor. It includes placenta prævia.

"Other accidents of labor" includes cases of difficult labor, operative delivery, rupture of the womb, and other complications, except hemorrhage, occurring at the time of labor.

"Puerperal septichæmia" (childbed or milk fever) is an infection coming on after labor or miscarriage.

"Puerperal albuminuria or convulsions," or "eclampsia," is an acute toxemia occurring during pregnancy, or during or after confinement, characterized, in its severest form, by convulsions.

"Phlegmasia alba dolens," often known as "milk leg," is a disease characterized by the swelling of a leg after confinement or miscarriage. The cause is the stoppage of a large vein of the thigh by a blood clot.

"Embolus" means blood clot. Sudden death may result from the carrying of such a blood clot to the heart or lungs.

"Following childbirth" (not otherwise defined) includes among other conditions insanity occurring after pregnancy or labor.

"Puerperal diseases of the breast" include inflammation or infection of the breast during lactation.

#### Death-registration area.

The statistics of causes of death are available only for a certain portion of the United States, included in the so-called "death-registration area." Unlike other civilized countries, the United States has no uniform laws for the registration of births and deaths. Moreover, the efficiency of enforcement of existing laws varies greatly in the different States. The Bureau of the Census in 1880 therefore established a "death-registration area," which comprises "States and cities in which the registration of deaths is returned as fairly complete (at least 90 per cent of the total), and from which transcripts of the deaths recorded under the State laws or municipal ordinances are obtained by the Bureau of the Census."<sup>1</sup> In 1880 this area included but 17 per cent of the total population of the United States. As States and cities have passed better laws and obtained better enforcement they have been added to the registration area; the latter has increased greatly in size, but even in 1913 included only 65.1 per cent of the population of the United States. For the remaining 34.9 per cent of the population of the country we have no reliable statistics. This 34.9 per cent includes the population of the greater number of the Southern States and of many Middle Western and Western States outside of certain registration cities in these States which are included in the area. No statements can be made, therefore, of the number of deaths from any cause in the United States as a whole; only an estimate can be made on the assumption that for any cause of death the same rate prevails in the remainder of the United States as in the death-registration area.

#### Provisional birth-registration area.

The registration of births is still more incomplete in this country than is the registration of deaths. For 1910 the United States Bureau of the Census established a "provisional birth-registration area," including the New England States, Pennsylvania, Michigan, New York City, and Washington, D. C.<sup>2</sup>

#### Methods of computing the death rates from all causes connected with pregnancy and confinement.

(1) *Death rates per 100,000 inhabitants.*—Trask<sup>3</sup> gives the definition, "Death rates may be expressed as the ratio of the total number of deaths, taken as a unit, to the population. For example: 1 in 60. The usual method, however, is to express these rates in terms of the

<sup>1</sup> U. S. Census. Mortality Statistics, 1911, p. 9.

<sup>2</sup> U. S. Census. Mortality Statistics, 1911, p. 25.

<sup>3</sup> Trask, J. W. "Vital statistics." U. S. Public Health Service, Supp. to the Public Health Reports, No. 12, p. 59.

number of deaths per 1,000 population, or in some instances per 10,000 or even 100,000, or 1,000,000." In the publications of the United States Bureau of the Census the death rates of all diseases, including those of the diseases connected with childbirth, are usually expressed in terms of the number of deaths per 100,000 total population. But a death rate computed in this way obviously gives a very misleading impression with regard to a disease to which only one group of the population is liable. In computing the death rate from the diseases connected with childbirth, only women of childbearing age should be considered, or, still better, only women actually bearing children in a given year. All individuals of all ages and both sexes may be exposed each year to a risk of typhoid fever, pneumonia, or tuberculosis; but during the year only the women pregnant or bearing children are exposed to the risk of death from the diseases connected with these functions.

(2) *Death rates per 100,000 women.*—This method of computing rates is somewhat superior to that of computing the deaths per 100,000 total inhabitants. It is used to some extent in foreign reports. These rates have been computed from estimates of female population furnished by the United States Bureau of the Census for the years 1900 to 1910 for the group of 11 States within the death-registration area in 1900. These are given in Table IV, on page 50.

(3) *Death rates per 100,000 women of childbearing age.*<sup>1</sup>—Such a rate, which is a much more accurate one than either of those mentioned above, can be computed for the registration area for only one year, the census year 1900. For that year only has the age and sex distribution of the registration area been published. The number of women 15 to 44 years of age in the registration area in that year was 7,383,154.<sup>2</sup> The number of deaths from childbirth among women 15 to 44 years was 3,712; of these 1,594 were from puerperal septicemia and 2,118 from all other diseases of pregnancy and confinement.<sup>3</sup> The death rates were, therefore, from childbirth or all diseases caused by pregnancy and confinement, 50.3; from puerperal septicemia, 21.6; and from all other diseases of pregnancy and confinement, 28.7.

(4) *Death rates per 1,000 births.*—As shown above, the method of computation of death rates which gives the clearest picture of the hazards of childbirth is that which takes into account only the women giving birth to children in that year. This is the method in use in a large number of foreign countries. The advantages of the method are self-evident.<sup>4</sup> A demonstration of the superiority of

<sup>1</sup> The female population between the ages of 15 and 45 years as determined by census enumeration, or by estimation for intercensal and postcensal years.—Trask, J. W. *Supra cit.*, p. 23.

<sup>2</sup> U. S. Twelfth Census, 1900. Vital Statistics, Part I, p. XLII.

<sup>3</sup> U. S. Twelfth Census, 1900. Vital Statistics, Part II, p. 242.

<sup>4</sup> Each death rate is in terms of registered, i. e., living, births. This is a more accurate measure than a statement per 1,000 of total population or per 1,000 total or married women at childbearing ages.—Newholme, A. *Maternal Mortality in Connection with Childbearing*. Grt. Brit. Local Govt. Bd., Supp. to Report of Medical Officer for 1914-15, p. 24.

this method of computation is obtained by a study of the tables giving the death rates from these diseases for foreign countries. In certain countries, as for instance Belgium and Hungary, there has been in recent years an apparent fall in the average death rates as computed per 100,000 population, while the average rates computed per 1,000 live births have remained stationary or risen. This phenomenon is due, evidently, to a decline in the birth rate in these countries during these years, and shows how misleading the rates as given per 100,000 population undoubtedly are in countries with declining birth rates. Whether a fall in the birth rate has occurred in the United States is not known. If it has occurred in the registration area, it would mean that the slight rise in rates per 100,000 population between 1900 and 1913 means a greater rise in rates computed according to the number of births. Such an error might compensate for the opposite error due to the more complete registration of deaths from childbirth in the later years of this period.

In computing the rates per 1,000 births two methods are in use: The computation of the number of deaths per 1,000 total births and that per 1,000 live births. Both methods depend upon an accurate registration of births; the first method is used in those foreign countries in which all births including stillbirths are required to be reported; the second, in those countries where only live births are reported. The first is probably the better method, because by it the whole number of women bearing children in a certain year is considered. But even this rate is not absolutely accurate. While the number of deaths includes those from diseases connected with miscarriage, the whole number of women having miscarriages is not used as a base, but only the number of those bearing stillborn and live children. Miscarriages are not reportable in any country, although a number of miscarriages (as the term is usually defined) probably are reported as stillbirths in certain countries. The fact that women having miscarriages are not considered in the base would lead to a somewhat higher death rate than that which would express absolutely the number of deaths per 1,000 women at risk. On the other hand, in the computation of this rate the fact is not taken into consideration that a certain number of births are multiple; that is, the number of births is larger than the number of women bearing children. Still another objection to the use of this rate, especially in the comparison of the rates of different countries, is the fact that the definition of stillbirth varies greatly according to the laws of different countries;<sup>1</sup> that is, in one country many cases may be reported as stillbirths which in another country, having a different

<sup>1</sup> Royal Statistical Society. "Report of special committee on infantile mortality." *Journal of the Royal Statistical Society*, 1913, Vol. LXXVI, p. 27.

interpretation of this term, might not be reported at all, as they would be classed as miscarriages.

The second method, in which the number of deaths per 1,000 live births is considered, is that used by foreign countries in which the registration of stillbirths is not required. England and Wales, Ireland, Scotland, and New Zealand are among this number.

The variation in different countries with regard to the definition of stillbirth causes a difficulty in the use of this method. In three of the countries studied—France, Belgium, and Spain—the term stillbirth includes infants alive at birth but dying before the registration of birth, i. e., within one to three days of birth. Because of these various difficulties, death rates for the foreign countries have been, wherever possible, computed by both methods.

On account of the lack of accurate birth registration neither method has been used in computing rates for the United States. Only for States and cities in the provisional birth-registration area, and for one year, 1910, can the death rates per 1,000 live births be given. These are shown in Table VI, page 52.

#### SOURCES OF ERROR IN THE STUDY OF DEATH RATES FROM CHILDBIRTH.

In all mortality statistics, and especially in those with which we are especially concerned in this bulletin, there are two general sources of inaccuracy in the figures: First, the figures for each year may be inaccurate, or may give an incomplete picture of actual conditions because of many different factors, such as incompleteness or inaccuracy of the figures, inappropriate methods of classification or computation, etc. Second, the figures for different years may not be comparable simply because of the great improvements that are made each year in methods of registration, computation, and classification. With the object in view of giving each year as accurate and clear a picture of the actual conditions as possible, tremendous advance in methods has been made yearly in this country and in other countries. This very advance, however, brings with it many difficulties in comparing the figures for the years before such improvements were instituted with those of the years after that time. Each year the figures give us more accurate information of the actual number of deaths and of the death rates; yet each year the comparison of the figures for that year with those in the past is fraught with more danger of error. In general, therefore, the study of the actual number of deaths and the death rates for the last years for which figures are obtainable is more valuable than any comparison of rates for different years. All these sources of error will now be discussed in detail.



### Inaccuracy of returns.

As all mortality statistics depend upon the returns of the cause of death as given by the physician or other person on the death certificates, their value depends on the degree of accuracy of diagnosis shown by these returns. As Hoffman<sup>1</sup> has pointed out, the returns for countries in which a medical certificate of the cause of death is not required must be of very small value. He states, however, that "For most of the civilized countries this requirement is met to a reasonably satisfactory degree."

The objection has frequently been raised, however, that there is a large percentage of error even in the returns made by physicians due to mistakes in diagnosis, such errors being more numerous in the case of certain diseases than of others. This matter has been considered by the United States Bureau of the Census.<sup>2</sup> Hoffman<sup>3</sup> defends the general validity of the death returns. He admits that there is serious risk of error in the "Careless or superficial use of the data of mortality statistics, irrespective of the diseases dealt with; for, as pointed out by Longstaff, \* \* \* 'there are numerous fallacies to which the classification of deaths according to their alleged causes is liable,' and he enumerates particularly \* \* \* the more or less varying proportions of indefinite causes, the deliberate falsification of returns for personal or family reasons, and the effect of the progress of medical science, improved diagnosis, etc." Hoffman, however, concludes: "All of these reasons notwithstanding, the conclusion appears to be incontrovertible that on the whole the present system of death registration is entitled to confidence and the results approximately represent the true state of the nation's health."

With regard to the diseases in question, however, inaccuracy of the returns undoubtedly constitutes a special source of error in the figures for all countries. The statistics of deaths due to puerperal septicemia (childbed fever or infection at the time of miscarriage or childbirth) are without question very incomplete. Many deaths due to this disease are reported, for obvious reasons, as due to some other condition or to some general condition, such as septicemia, pyemia, and the like. This fault in all statistics on the subject has been commented on very frequently both in this country and in foreign countries.<sup>4</sup>

<sup>1</sup> Hoffman, F. L. *The Mortality from Cancer Throughout the World*, 1915, p. 2.

<sup>2</sup> U. S. Census. *Mortality Statistics*, 1912, p. 24.

<sup>3</sup> Hoffman, F. L. *Supra cit.*, p. 3.

<sup>4</sup> (a) It is very difficult to make accurate statements as to the frequency of puerperal infection, especially when it occurs outside of hospital practice. Concerning this condition the vital statistics of the health officers of the various American cities are of no value, inasmuch as the vast majority of deaths from this disease are returned as being due to malaria, typhoid fever, pneumonia, or other causes.—Williams, J. W. *Obstetrics*, 1913, p. 900. (b) It is very difficult to estimate the frequency of puerperal infection outside of hospitals, since many deaths are reported as due to typhoid, malaria, pneumonia, etc.—Edgar, J. C. *The Practice of Obstetrics*, 1903, p. 752. (c) It is not unlikely, furthermore, that in a considerable number of deaths due to childbearing the fact that they are associated with childbearing escapes certification.

It follows; however, that almost never is a case reported as due to infection at confinement when it is really due to some other cause; in other words, the figures though undoubtedly incomplete are reliable as far as they go; they are a statement of the minimum number of cases which have occurred. As Newsholme remarks,<sup>1</sup> many cases of puerperal septicemia probably are reported as due to other conditions associated with childbirth; so that the total figures for all diseases associated with this condition should always be noted, although it may be the figures for puerperal septicemia in which our immediate interest lies.

Many deaths due to other complications of pregnancy and confinement are also undoubtedly reported under other headings. This is especially true of cases of puerperal albuminuria and convulsions, which are reported as due to acute nephritis or simply to convulsions; and of hemorrhage or phlebitis following miscarriage or labor, reported without reference to their connection with childbirth.

#### Limited area and short period of time represented by figures.

In the United States the limited area of the country (the death-registration area) for which any figures are available is an element of weakness in the statistics. Though this area and its population are absolutely very large, they can not be considered as representative of the entire country. Any estimate based on the figures for the registration area is open to criticism on account of differences in age and sex distribution in different parts of the country.

In the United States the short period for which any figures are available lessens greatly the value of a study such as this. In foreign countries comparisons of the death rates for a long series of years may be made, even though errors due to lack of comparability of the figures may occur. In this country information is available

Deaths from puerperal fever are likely also to be understated; and the desirability is confirmed of basing inferences as to excessive mortality from childbearing on all the conditions concerned in this mortality, and not merely on the death returns for puerperal fever.—Newsholme, A. *Supra cit.*, pp. 26, 30. (d) It may be objected that owing to faulty registration and deficient death certification the returns are not reliable. That this objection may have some weight in estimating the amount of mortality, especially as regards puerperal fever (in which for obvious reasons the death returns are avowedly defective), I fully admit; but, as this communication seeks to compare the mortality of one year with that of another and of one part of the kingdom with that of another, and as the sources of error apply to each, the result can not be materially affected. In estimating the true amount of mortality, however, a mental correction should certainly be made for this obvious source of error.—Boxall, R. "The mortality of childbirth," *Lancet*, 1893, Vol. II, p. 10. (e) Warren, S. P. "The prevalence of puerperal septicemia in private practice at the present time, contrasted with that of a generation ago." *Amer. Jour. of Obstetrics*, 1906, Vol. LI, p. 301.

<sup>1</sup> But the above extreme local variations in the proportion between deaths from puerperal fever and from other dangers of childbearing suggest that in death certification there may be local variations in the extent to which deaths from puerperal fever are returned under the heading of other conditions associated with childbearing. \* \* \* On the whole, it is likely that in comparing counties and county boroughs with each other, the safest plan is to utilize only the death rates from the two sets of conditions taken together.—Newsholme, A. *Supra cit.*, p. 26.

only for the census years 1880, 1890, and 1900 and for the calendar years from 1900 to 1913, inclusive. Moreover, the area covered by the reports previous to 1890 was so small that any comparison between years prior to 1890 and years subsequent to that date has seemed unwise.

### **Methods of computation.**

In the United States the computation of the death rates from the diseases in question by a method (computation per 100,000 total population) giving but an inaccurate picture of the facts is necessarily a source of error in the study. This method also makes difficult a comparison of the death rates with those of foreign countries.

### **Sources of error in comparisons of death rates of different years.**

There are many special sources of error involved in the comparison of death rates of the registration area of the United States from these causes in different years.

First. Differences in the constitution of the death-registration area cause one of the most important difficulties in comparison. As before stated, the death-registration area is not an unchanging entity, but has been added to almost yearly as registration has improved in various States and cities. This constant increase constitutes a serious source of error in comparing the death rates for this area for different years. Within the course of the years studied, States or cities having a particularly high or low rate from the disease in question may have been added to the registration area.<sup>1</sup> This difficulty is so serious that in making comparisons of the death rates in the registration area of the United States from a certain disease through a series of years the publications of the United States Bureau of the Census always point out the influence which the inclusion of a certain State may have had upon the rate of the disease in question for the registration area.

The same method may be applied, for example, to a comparison of the death rates from childbirth in the registration area for the years 1909 and 1910. In 1909 the rate for the registration area was 15.3; in 1910, 15.7. In 1910, however, four States—Minnesota, Montana, Utah, and North Carolina<sup>2</sup>—were added to the registration area and one State—South Dakota—was dropped. In that year the death rate from childbirth in Minnesota was 11.9 per 100,000 inhabitants, in Montana 16.4, in Utah 18.4, and in the municipalities of North Carolina 30.7. That in South Dakota in 1909 was 21.7 for the urban and 12.9 for the rural portions of the State. Evidently the exact determination of the effect which the inclusion or exclusion of any one of these States exerted upon the death rate of the registration area is a complicated matter.

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<sup>1</sup> U. S. Census. Mortality Statistics, 1909, p. 9.

<sup>2</sup> Municipalities of 1,000 or more inhabitants in 1900.

It was thought wise, therefore, in this study to make, in addition to a comparison of the death rates from childbirth in the registration area for 1890 and from 1900 to 1913, a comparison of the death rates shown (1) for the same series of years by the group of States which have been registration States since 1890, and (2) for the years 1900 to 1913 by the group of States which have been registration States since 1900. Obviously these two comparisons contain no error due to changes in the groups of States compared from year to year.

The group of eight States which have been registration States since 1890 includes all the New England States except Maine, also New York, New Jersey, and the District of Columbia. (See Table II, p. 49.) For this group of States no permanent decrease has occurred in the death rate from childbirth per 100,000 population in the 23 years studied. There was a decrease in the rate between 1890 and 1900, followed by a rise, and then by slightly fluctuating rates. The rates for 1890<sup>1</sup> and 1913, however, are almost identical—14.1 and 14.3 per 100,000 inhabitants.

The rates for the second group of 11 States show no decline but rather an increase in the 13 years from 1900 to 1913. These States have been registration States since 1900 and include, besides the 8 above mentioned, Maine, Michigan, and Indiana. The death rate from childbirth in 1900<sup>2</sup> was 13.4; in 1913, 14.9; with fluctuations between 12.7 and 15.5.

The fact that the death rates from childbirth show no decrease in the registration area from 1890 to 1913 (see Table I, p. 49) is therefore corroborated by the two comparisons just made. The rates for this area also show fluctuations from year to year, but are nearly identical for 1890 and 1913, i. e., 15.3 and 15.8.

This possible source of error in the comparison of the rates in the registration area for different years, therefore, is shown to be of practical unimportance.

A comparison of the three Tables I, II, and III brings out several interesting facts. Tables I and II both show a decline in the rates between 1890 and 1900; this fall is followed by a corresponding rise and fluctuating rates. The rates for the group of 8 States shown in Table II are almost uniformly slightly lower for each year than are those of the death-registration area shown in Table I.

Second. The most important source of error in the comparisons of the death rates of various years is due to the improvements which have been made yearly in the accuracy of the returns of the cause of death. In each State, newly admitted to the registration area, improvements are made continually in the completeness and accuracy of the death returns. In addition one special improvement has been made in the returns in the registration area.

<sup>1</sup> Census year ending May 31.

<sup>2</sup> Calendar year

It has already been pointed out with regard to the diseases under consideration that deaths due to puerperal septicemia and to other complications of pregnancy and confinement are frequently reported as due to such indefinite causes as septicemia, pyemia, hemorrhage, phlebitis, convulsions, etc. In several foreign countries the attempt has been made for some years to render the records more complete by making inquiries as to cases of death of women of childbearing age where the cause of death is an indefinite one of this character. To each physician making such a report for a woman of childbearing age a confidential inquiry is sent, asking whether or not the cause of death had any relation to childbirth or miscarriage. Boxall<sup>1</sup> states that this has been done in England since 1881 and has resulted in an increase of about 12 per cent in the number of cases reported as due to puerperal septicemia. In this country since about 1906<sup>2</sup> the State registrars of vital statistics have cooperated with the United States Bureau of the Census in making their reports more complete through this practice.

For several years<sup>3</sup> the Census Bureau has made an inquiry in many cases where the cause of death of a woman of childbearing age has been returned to it as septicemia, pyemia, or peritonitis, and additional cases of puerperal septicemia have been added in this way. That bureau is unable, however, to estimate the percentage of cases which have thus been added. In a test<sup>4</sup> in which a number of letters of inquiry were sent to physicians returning deaths as due to meningitis, paralysis, convulsions, pneumonia, and peritonitis, 102 cases returned as peritonitis were thus investigated. Eight cases were changed to puerperal septicemia following the answer to these inquiries. The following statement is made: "If the percentages of change resulting from this investigation, which, though limited, may prove to be fairly representative, be applied to the numbers of deaths compiled from the various causes for the registration area for 1911, \* \* \* some of the definite causes would be increased as follows: \* \* \* Puerperal septicemia from 4,376 to 4,560, or 4.2 per cent."<sup>5</sup>

Without doubt, therefore, the records in this country since 1906, and especially since 1912, are more complete than those for previous years.<sup>4</sup>

Obviously greater accuracy of the returns leads to an apparent rise in rate, even when the true death rate is stationary or declining slightly. It is impossible to estimate how great has been the influence

<sup>1</sup> Boxall, R. "Mortality in childbed, both in hospital and in general practice," *Jour. of Obstetrics and Gynecology of the British Empire*, 1905, Vol. VII, p. 322; Newsholme, A. *Supra cit.*, p. 25.

<sup>2</sup> Statement by Chief Statistician for Vital Statistics, U. S. Bureau of the Census.

<sup>3</sup> U. S. Census. *Mortality Statistics*, 1911, pp. 37, 38.

<sup>4</sup> Similar improvements in the records for other causes of death have been made in recent years through the method of making similar inquiries with regard to deaths reported as due to such indefinite causes as simple meningitis, paralysis without specified cause, etc. See U. S. Census. *Mortality Statistics*, 1912, pp. 23, 24, and Dublin, L. I., and Kopf, E. W. "An experiment in the compilation of mortality statistics," *Quart. Public. of the Amer. Stat. Assn.*, 1913, Vol. XIII, p. 639.

of this factor upon the death rates of childbirth and of puerperal septicemia since 1900. As an index the changes in the death rates for the death-registration area from the indefinite causes, "purulent infection and septicemia," "simple peritonitis," "convulsions," and "hemorrhage, other diseases of the circulatory system," between 1900 and 1913 should be studied.

It is significant that the average death rate from purulent infection and septicemia, which in 1901-1905 was 6.1 per 100,000 population, fell in 1906-1910 to 3.8 and then decreased steadily, being 2.8 in 1913.<sup>1</sup> In the same way the death rate from simple peritonitis, which was 10.8 in 1901-1905, fell to 6.1 in 1906-1910 and 2.7 in 1913.<sup>1</sup> The other causes mentioned have shown a decline which is much less marked.

As these death rates represent those of the entire population, not those of women of childbearing age, their decline can be ascribed only in part to the fact that a number of cases formerly returned as due to these causes are now ascribed to puerperal septicemia and other diseases caused by pregnancy and confinement. It is plain, however, that this factor has been a very important one in determining their decrease.

In general, then, it may be stated that recent improvements in death certification must be borne in mind in making comparisons of the death rates from childbirth since 1900; that these improvements probably account for the apparent rise in the death rate between 1900 and 1913, and may, indeed, conceal a slight actual decrease in the rates during those years. It is not, however, probable that any substantial decrease in rate has been concealed in this way.

The comparisons made in Tables II and III of rates for the group of 8 States which have been in the registration area since 1890 and for that of 11 States which have been in this area since 1900 are probably less subject to this source of error than is a comparison of rates for the registration area. In the States in which registration has been good for a number of years improvements made in the returns for the more recent years will not be so marked a factor.

Third. A third source of error in the comparison of death rates for various years in this country results from the changes in classification of causes of death which have been made. In the United States the International List of Causes of Death was adopted for use in the calendar year 1900. A different classification was in use before that time. The group of diseases included in the older classification under "Affections connected with pregnancy" are included under the title "The puerperal state," Division VII of the detailed International List (see p. 29), corresponding to the terms "Child-

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<sup>1</sup> U. S. Census. Mortality Statistics, 1913, pp. 53, 54.

birth" or "All diseases caused by pregnancy and confinement" as used in this bulletin. Therefore these large groups can be compared for the census years 1890 and 1900 and the calendar years 1900 to 1913. The title puerperal septicemia of the older classification does not correspond, however, to that of "puerperal septichæmia" of the International Classification. Nevertheless, it has been thought best to print the figures for puerperal septicemia for the census years 1890 and 1900 with the warning that these figures are not exactly comparable with the figures for this disease for the calendar years 1900 to 1913. At the second revision of the International Classification, in force for the registration area January 1, 1910, several changes were made in the classification of the group of diseases with which we are concerned, i. e., "The puerperal state." These changes do not affect the whole group, but only the subgroups, especially No. 137, "Puerperal septichæmia." Three causes of deaths included under this heading under the first revision were removed and included under other headings; these are: Puerperal toxemia, included now under 138; puerperal phlebitis, changed to a separate heading, 139; and retention of the placenta, now included under 135. No other groups previously not included were added to "Puerperal septichæmia" in that year. These changes would naturally cause a decrease in the number of deaths ascribed to puerperal septicemia and a corresponding decrease in the death rate for this disease, with an increase in the rate of those included under "Other diseases caused by pregnancy and confinement." This must be remembered in comparing the rates for years succeeding 1910 with those preceding it, both in the United States and in all other countries studied. How far this change in the death rate for puerperal septicemia compensates in the United States for the opposite error due to the more complete returns for this disease brought about by the inquiries sent by the Bureau of the Census it would be impossible to say.

#### **Sources of error in a study of foreign statistics.**

It may be claimed that a comparison of the vital statistics of various foreign countries involves a certain risk of error due to differences in the methods of registration employed in the various countries and in the degrees of accuracy of the returns. For instance, the comparatively low death rate of a certain country may be explained as being due to the incompleteness of the returns in that country. Beyond this source of error, which can not be avoided, two other especial sources appear to exist in the comparison of the death rates from the diseases caused by childbirth. The first one is that already treated at some length, i. e., the development of errors due to the different methods used by different countries in computing the rates. This source of error has been avoided by reckoning the rates uniformly for

each country in the group considered according to two different methods, i. e., per 100,000 total population and per 1,000 live births. While neither method of computation is an ideal one, it has been necessary to use them as they alone give a basis of comparison of the rates of all the countries considered.

A second source of error has also been alluded to; it is the lack of uniformity in methods of classification of the causes of death. Many of the countries under consideration have not used the International Classification at all, or only for a portion of the period studied. As the best means available for avoiding this difficulty, the figures for each country have been used as published in the *Statistique Internationale du Mouvement de la Population d'après les Registres d'Etat Civil*, prepared by the *Ministère du Travail, Bureau de la Statistique Générale* of France. In this publication figures for countries not using the International Classification have been rearranged to conform as nearly as possible to the divisions of the International List. Figures, however, are available from this source only up to the year 1910; for the years following, figures have been obtained from the latest available original reports of each country. For those countries not using the International Classification the figures have been rearranged in the same way to conform to it as nearly as possible.<sup>1</sup>

Slight differences in methods of classification will probably not affect the death rates to any great extent, nor will they often affect the number of deaths, and consequently the death rates, of the whole group of diseases—"The puerperal state," or "All diseases caused by pregnancy and confinement." Only the proportion of deaths to be ascribed to either of the two subgroups "puerperal septicemia" and "other diseases caused by pregnancy and confinement," will be affected. A rearrangement of the deaths within the group, ascribing a larger number of deaths to puerperal septicemia will bring, of course, a decrease in those reported as due to "other diseases caused by pregnancy and confinement." For this reason, therefore, the total number of deaths for the large group and the death rate for this group are more important than those of the subgroups. (See p. 36.) An exception to the statement in regard to the differences in method of classification must be made for the figures of England and Wales. Previous to 1911, the year in which the International Classification was adopted, a certain group of deaths almost universally included under the large group "The puerperal state" or "All diseases caused by pregnancy and confinement" was not included in the English and Welsh figures, i. e., deaths due to puerperal nephritis and albuminuria. Consequently in these earlier years the reports of deaths

<sup>1</sup> On pages 57 to 59 will be found especial notes as to difficulties encountered in the reclassification of the figures of various countries.



ascribed to childbirth or all diseases caused by pregnancy and confinement are incomplete and the death rates from this group of causes are lower than would have been the case had the International Classification been used. This fact must be remembered in making comparisons between England and Wales and other countries. The amount of the error, which is not a very large one, can be estimated by noting the number of deaths annually reported from this cause for the years 1911 to 1914. (See p. 58; also Table XV, p. 60.) Whether or not there is the same incompleteness in the figures of other countries could not be learned from the reports.

In general, foreign statistics have been used in this report as giving a rough estimate of actual conditions. Unfortunately more exact information is not in existence. It has not been considered wise, in view of the possibilities of error in the material, to use any method of analysis which assumes a higher degree of accuracy than can be attributed to all the existing figures.

#### FOREIGN STATISTICS.

##### Comparison of the average death rates from childbirth in certain foreign countries and in the United States.

1. *Average death rates per 100,000 population.*—In order to obtain a basis for comparison with the rates for the death-registration area of the United States the average rates for 15 foreign countries have been reckoned according to the number of deaths per 100,000 population. These rates are given in Table XII, on page 56, in which the countries are arranged in order, the one having the lowest rate being first. Many of the countries show rates differing but very little from that of the United States. The rates for 9 of the 16 countries vary between 12.4 and 15.2, while that of the registration area is 14.9. Other facts brought out by this table are mentioned on page 22.

2. *Average death rates per 1,000 live births.*—It has been realized that the average death rate from these diseases as above computed gives a very misleading idea of the actual death rate on the basis of the number of women bearing children. Differences in the age and sex composition of the population of the countries studied, and, above all, differences in the birth rate, obviously lead to great error. Unfortunately the rate per 1,000 births can not be given for the death-registration area of the United States, though it can be given for one year (1910) for the provisional birth-registration area. This rate is 6.5 per 1,000 live births. The comparison of such a rate, for a limited area of a country reckoned only for one year, with average rates of other countries reckoned for a series of years, is of course unfair. Still it is a noteworthy fact that the rate for this small area of the United States is considerably higher than that for any country in the group considered.

Table XIII, page 56, gives the average death rates reckoned per 1,000 live births for the 15 foreign countries already studied arranged in order, the one having the lowest rate being first. The order here shows a considerable variation from that in the previous table. However, the same group of countries shows the lowest rates computed according to either method of computation; these are Sweden, Italy, and Norway. Similarly, the highest rates in both tables are shown by a second group of countries—Belgium, Spain, Switzerland, Australia, and Scotland. The rates for Ireland form an exception. The rate for that country, reckoned per 100,000 inhabitants, is only moderately high; reckoned per 1,000 live births, however, it is one of the higher rates.

3. *Percentage of deaths caused by puerperal septicemia.*—Another interesting feature of the foreign figures is the great variation shown among the different countries in the percentage of the total deaths from childbirth which are ascribed to puerperal septicemia. Table XIV gives these figures for each country for as large a part of the period 1900 to 1910 as figures are available. As pointed out frequently throughout this report, on account of the inaccurate returns from puerperal septicemia the total rate from childbirth is a more reliable one than is the rate from puerperal septicemia; therefore, sweeping conclusions can not be based on these comparisons. Otherwise these figures would be extremely significant, as the deaths from puerperal septicemia are the most easily preventable of all the deaths from childbirth. In the larger number (11) of the 15 foreign countries studied the deaths from puerperal septicemia constitute from 30 to 50 per cent of the total number of deaths from childbirth. In the registration area of the United States they represent 44 per cent. Norway, 51.2 per cent, and Spain, 62.8 per cent, show the only two percentages higher than 50; New Zealand, 25.2 per cent, and Hungary, 26.7 per cent, show markedly low percentages.

**Comparison of the changes in the death rates from childbirth in certain foreign countries for the years 1900 to 1913.**

Far more valuable than a comparison of average rates of foreign countries is a study of the rates of each country for a series of years in order to discover whether they are decreasing or increasing and to compare such changes in the various countries. While it may be dangerous on account of different methods of registration and classification to compare the rates of different countries, no such source of error is attached to the comparison of rates in the same country for a number of years. The period 1900 to 1913 (or the latest year for which figures are available) is a very short one for a study of a change in death rates. It would have been far more interesting to study the death rates for a long series of years in each country, choosing a

period beginning before the introduction of methods of asepsis. But such a study for the complete list of countries considered was not thought advisable, because of the difficulties caused by variations in classification of causes of death in the earlier years.

In order to study the rates for any increase or decrease occurring during the last 13 years, the rates per 1,000<sup>1</sup> live births will be used rather than those per 100,000 population. In several countries—Belgium, Hungary, Italy, Norway, Prussia, and Spain—the rate from childbirth per 100,000 population apparently has fallen during the period, while the rate per 1,000 live births has remained almost the same, or has risen. The cause of this inconsistency, as explained on page 33, is the fact that in these countries the birth rate or the proportionate number of births to the number of inhabitants has decreased.

Average death rates for the foreign countries studied are given for periods of from 3 to 5 years in Table XVI. Differences in averages from period to period are more significant than differences in rates from year to year, and they indicate more accurately and readily whether death rates in a given country are increasing or decreasing.

In preparing Table XVI it would have been more satisfactory to base averages on identical five-year periods for all countries, but since the periods for which the information was available varied so widely in different countries, this procedure was impracticable, and the complete periods were divided into as nearly uniform subperiods as possible.

The countries will be considered in different groups.

*Countries showing a decrease in the death rates from all diseases caused by pregnancy and confinement.*—England and Wales show a fall in the total death rate from these diseases and also a fall in the death rate from puerperal septicemia in the years between 1900 and 1914.<sup>2</sup> The total death rate per 1,000 live births fell from 4.4 in 1900–1904 to 3.7 in 1910–1914. The death rate from puerperal septicemia per 1,000 live births was 1.9 in 1900–1904, and 1.4 in 1910–1914. The still greater apparent drop in the rates per 100,000 inhabitants will be noted. This decrease in the rates from these diseases in England and Wales since 1900 is especially important because the lack of decrease for a long period of time before 1900 has been the subject of considerable discussion.

Boxall<sup>3</sup> in 1893 and 1905 published two reports which aroused medical interest. Based on studies of the figures published by the

<sup>1</sup> The rate per 1,000 live births will be found in column 8 of Table XV, p. 60.

<sup>2</sup> In studying the figures after 1910, only the figures given as 1911 (a) and 1912 (a), etc., must be compared with the figures of years before 1910, for the reasons explained on p. 58.

<sup>3</sup> Boxall, R. "The mortality of childbirth," *Lancet*, 1893, Vol. II, p. 9; "Mortality in childbed, both in hospital and in general practice," *Jour. of Obstetrics and Gynaecology of the British Empire*, 1905, Vol. VII, p. 315.

registrar general, these reports comment on the lack of decrease in the total mortality from childbirth and from puerperal septicemia in the period since the introduction of methods of antiseptics.

Sir Arthur Newsholme, medical officer of the Local Government Board of England, published last year a most interesting report on maternal mortality in connection with childbearing in England and Wales.<sup>1</sup> The report in question will no doubt be the inspiration of studies of this subject in many countries, just as it has been of the present report on conditions in the United States. He finds that from 1874 to 1893 there was no decline in the rates from puerperal septicemia, or from other conditions associated with childbirth, but that since 1895 there has been a marked decline in the rate from puerperal septicemia and a decline in the total rate from childbirth. There has been, however, little change in the death rate from conditions other than puerperal septicemia caused by childbirth. He writes: "Even so far as puerperal fever is concerned, notwithstanding the improvement already secured, it must be regarded as highly unsatisfactory that in 1914 for every 644 infants born 1 mother lost her life from puerperal infection, either present before the birth of the infant, or more often acquired during or soon after its birth. A large portion of this mortality, with its still greater amount of associated sickness, could at once be prevented were adequate antenatal care and skilled attendance under satisfactory conditions at and after birth made available."<sup>1</sup>

The interest in this subject in England is reflected in several acts which have been passed in recent years with the object of securing better antenatal and confinement care for all women at childbirth. These are the midwives act, 1902; the notification of births act, 1907; the notification of births (extension) act, 1915, the maternity benefits under the national insurance act, and the voting of grants by Parliament in aid of work done by local authorities and voluntary agencies to promote maternal and child welfare work.

The rates for Ireland show a decrease in the death rate from childbirth. In 1902 to 1906 the rate was 5.8; in 1911 to 1914 it was 5.2. There was also a slight decrease in the rate from puerperal septicemia.

Japan shows also a fall in the rate from childbirth from 4.2 in 1901-1904 to 3.6 in 1909-1912. The death rate from puerperal septicemia, however, has increased slightly.

The rates for New Zealand and Switzerland have also shown a decline in the periods studied.

*Countries showing almost stationary rates from the diseases caused by pregnancy and confinement.*—This group includes all the remaining countries considered except Scotland. In several of these countries

<sup>1</sup> Newsholme, A. *Maternal Mortality in Connection with Childbearing*. Grt. Brit. Local Govt. Bd., Supp. to Report of Medical Officer for 1914-15, pp. 22, 23.

there has been a slight fall or rise in the rates between the first and last period, amounting in each case to less than 0.5 of 1 per 1,000 live births.

In Prussia no demonstrable fall has occurred in the rate per 1,000 live births from all diseases caused by pregnancy and confinement, nor in that from puerperal septicemia. The total rate in 1903 to 1906 was 3.2; in 1907 to 1910 it was 3.1.

The almost stationary rates for Australia, Belgium, Hungary, Italy, Norway, Spain, and Sweden will also be noted in the tables.

In all of these countries numerous physicians have called attention to the stationary or rising death rates from childbirth and from childbed fever. A large medical literature has grown up on this subject. Von Herff<sup>1</sup> comments on the figures published by Krohme, showing for Prussia an increasing death rate from puerperal septicemia in the years 1901 to 1904. He attributes it to the laxity of physicians in carrying out antiseptic methods and to the unnecessarily frequent use of forceps and to other obstetrical operations. Buess<sup>2</sup> and Winter<sup>3</sup> are among those who have written more recently on the question of these death rates in Switzerland, East Prussia, and other European countries.

*Countries showing a rise in rates.*—The total mortality rate from diseases of childbirth for Scotland has shown a definite increase from 5.1 per 1,000 live births in 1901–1905 to 5.8 in 1911–1914. This increase, however, has not been due apparently to an increase in the rate from puerperal septicemia; in fact, this rate has shown a fall.

<sup>1</sup> Von Herff, O. "Wie ist der zunehmenden Kindbettfiebersterblichkeit zu steuern? Minderung der Operationen. Besserung der Desinfektion in der Hauspraxis." *Münchener Medizinische Wochenschrift*, 1907, Vol. LIV, p. 1017.

<sup>2</sup> Buess. *Zeitschrift für Geburtshilfe und Gynäkologie*, 1915, Vol. LXXVII, p. 735.

<sup>3</sup> Winter. "Die Bekämpfung des Kindbettfiebers in Ostpreussen." *Deutsche Medizinische Wochenschrift*, 1908, Vol. XXXIV, p. 2244.



### PART III. GENERAL TABLES.

TABLE I.—Population, deaths, and death rates per 100,000 population in the death-registration area from diseases caused by pregnancy and confinement, 1890 and 1900 to 1913.

Year. <sup>1</sup>	Population of death-registration area.		Deaths from diseases caused by pregnancy and confinement.					
			Number.			Rate per 100,000 population.		
	Total.	Per cent of population of United States.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1890 <sup>2</sup> .....	19,650,440	31.4	3,011	<sup>3</sup> 1,383	1,628	15.3	<sup>4</sup> 7.0	8.3
1900 <sup>2</sup> .....	24,807,289	37.9	3,772	<sup>3</sup> 1,619	2,153	13.1	<sup>4</sup> 5.6	7.5
1900.....	30,765,618	40.5	4,106	1,769	2,337	13.3	5.7	7.6
1901.....	31,370,952	40.3	4,294	1,882	2,412	13.7	6.0	7.7
1902.....	32,029,815	40.4	4,164	1,813	2,351	13.0	5.7	7.3
1903.....	32,701,063	40.4	4,560	1,992	2,577	14.0	6.1	7.9
1904.....	33,345,163	40.4	5,109	2,291	2,818	15.3	6.9	8.5
1905.....	34,052,201	40.4	5,077	2,309	2,768	14.9	6.8	8.1
1906.....	41,983,419	48.9	6,341	2,622	3,719	15.1	6.2	8.9
1907.....	43,016,990	49.2	6,719	2,908	3,811	15.6	6.8	8.9
1908.....	46,789,913	52.5	7,344	3,271	4,073	15.7	7.0	8.7
1909.....	50,870,518	56.1	7,791	3,427	4,364	15.3	6.7	8.6
1910.....	53,843,896	58.3	8,455	3,892	4,563	15.7	7.2	8.5
1911.....	56,275,977	63.1	9,456	4,376	5,080	16.0	7.4	8.6
1912.....	60,427,247	63.2	9,035	3,905	5,130	15.0	6.5	8.5
1913.....	63,298,718	65.1	10,010	4,542	5,468	15.8	7.2	8.6
Annual average:								
1901 to 1905.....	32,699,843	.....	4,643	2,067	2,586	14.2	6.3	7.9
1906 to 1910.....	47,300,947	.....	7,330	3,224	4,106	15.5	6.8	8.7

<sup>1</sup> Calendar year, unless otherwise specified.

<sup>2</sup> Census year ending May 31.

<sup>3</sup> Figures for puerperal septicaemia for the census years 1890 and 1900 not comparable with those for later years. See p. 41.

TABLE II.—Deaths and death rates per 100,000 population in the 8 States within the death-registration area in 1890<sup>1</sup> from diseases caused by pregnancy and confinement, 1890 and 1900 to 1913.

Year. <sup>1</sup>	Deaths from diseases caused by pregnancy and confinement.					
	Number.			Rate per 100,000 population.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1890 <sup>2</sup> .....	1,655	<sup>3</sup> 698	957	14.1	<sup>4</sup> 6.0	8.2
1900 <sup>2</sup> .....	1,806	<sup>3</sup> 791	1,015	12.6	<sup>4</sup> 5.5	7.1
1900.....	1,905	798	1,107	13.3	5.6	7.7
1901.....	1,903	747	1,156	13.0	5.1	7.9
1902.....	1,842	762	1,080	12.4	5.1	7.2
1903.....	1,998	801	1,197	13.1	5.3	7.9
1904.....	2,305	996	1,309	14.9	6.4	8.4
1905.....	2,434	1,033	1,401	15.4	6.5	8.9
1906.....	2,434	989	1,445	15.0	6.1	8.9
1907.....	2,595	1,066	1,509	15.6	6.5	9.1
1908.....	2,450	1,050	1,400	14.4	6.2	8.2
1909.....	2,537	1,034	1,503	14.5	5.9	8.6
1910.....	2,608	1,145	1,463	14.6	6.4	8.2
1911.....	2,722	1,179	1,543	14.9	6.4	8.4
1912.....	2,574	1,049	1,525	13.9	5.6	8.2
1913.....	2,707	1,140	1,567	14.3	6.0	8.3

<sup>1</sup> Excluding Delaware.

<sup>2</sup> Calendar year, unless otherwise specified.

<sup>3</sup> Census year ending May 31.

<sup>4</sup> Figures for puerperal septicaemia for the census years 1890 and 1900 not comparable with those for later years. See p. 41.





### PART III. GENERAL TABLES.

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	Total.	Per cent of population of United States.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1890 <sup>2</sup> .....	19,659,440	31.4	3,011	<sup>3</sup> 1,383	1,628	15.3	<sup>3</sup> 7.0	8.3
1900 <sup>2</sup> .....	28,807,269	37.9	3,772	<sup>3</sup> 1,619	2,153	13.1	<sup>3</sup> 5.6	7.5
1900.....	30,765,618	40.5	4,106	1,769	2,337	13.3	5.7	7.6
1901.....	31,370,852	40.3	4,294	1,882	2,412	13.7	6.0	7.7
1902.....	32,029,815	40.4	4,164	1,813	2,351	13.0	5.7	7.3
1903.....	32,701,083	40.4	4,569	1,992	2,577	14.0	6.1	7.9
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1906.....	41,983,419	48.9	6,341	2,622	3,719	15.1	6.2	8.9
1907.....	43,016,490	49.2	6,719	2,908	3,811	15.6	6.8	8.9
1908.....	46,789,013	52.5	7,344	3,271	4,073	15.7	7.0	8.7
1909.....	50,870,518	56.1	7,791	3,427	4,364	15.3	6.7	8.6
1910.....	53,843,496	58.3	8,455	3,802	4,653	15.7	7.2	8.5
1911.....	59,275,777	63.1	9,456	4,376	5,080	16.0	7.4	8.6
1912.....	60,427,247	63.2	9,035	3,905	5,130	15.0	6.5	8.5
1913.....	63,298,718	65.1	10,010	4,542	5,468	15.8	7.2	8.6
Annual average:								
1901 to 1905.....	32,669,543	.....	4,643	2,067	2,586	14.2	6.3	7.9
1906 to 1910.....	47,300,947	.....	7,330	3,224	4,106	15.5	6.8	8.7

<sup>1</sup> Calendar year, unless otherwise specified.

<sup>2</sup> Census year ending May 31.

<sup>3</sup> Figures for puerperal septicemia for the census years 1890 and 1900 not comparable with those for later years. See p. 41.

TABLE II.—Deaths and death rates per 100,000 population in the 8 States within the death-registration area in 1890<sup>1</sup> from diseases caused by pregnancy and confinement, 1890 and 1900 to 1913.

Year. <sup>2</sup>	Deaths from diseases caused by pregnancy and confinement.					
	Number.			Rate per 100,000 population.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1890 <sup>3</sup> .....	1,655	4,698	957	14.1	46.0	8.2
1900 <sup>3</sup> .....	1,806	4,791	1,015	12.6	45.5	7.1
1900.....	1,905	798	1,107	13.3	5.6	7.7
1901.....	1,903	747	1,156	13.0	5.1	7.9
1902.....	1,842	762	1,080	12.4	5.1	7.2
1903.....	1,998	801	1,197	13.1	5.3	7.9
1904.....	2,305	996	1,309	14.9	6.4	8.4
1905.....	2,434	1,033	1,401	15.4	6.5	8.0
1906.....	2,434	989	1,445	15.0	6.1	8.9
1907.....	2,595	1,066	1,509	15.6	6.5	9.1
1908.....	2,450	1,050	1,400	14.4	6.2	8.2
1909.....	2,537	1,034	1,503	14.5	5.9	8.6
1910.....	2,608	1,145	1,463	14.6	6.4	8.2
1911.....	2,722	1,179	1,543	14.9	6.4	8.4
1912.....	2,574	1,049	1,525	13.9	5.6	8.2
1913.....	2,707	1,140	1,567	14.3	6.0	8.3

<sup>1</sup> Excluding Delaware.

<sup>2</sup> Calendar year, unless otherwise specified.

<sup>3</sup> Census year ending May 31.

<sup>4</sup> Figures for puerperal septicemia for the census years 1890 and 1900 not comparable with those for later years. See p. 41.

TABLE III.—Deaths and death rates per 100,000 population in the 11 States within the death-registration area in 1900 from diseases caused by pregnancy and confinement, 1900 to 1913.

Year. <sup>1</sup>	Deaths from diseases caused by pregnancy and confinement.					
	Number.			Rate per 100,000 population.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1900 <sup>2</sup> .....	2,568	<sup>3</sup> 1,150	1,418	12.9	<sup>3</sup> 5.8	7.1
1900.....	2,682	1,155	1,527	13.4	5.8	7.6
1901.....	2,704	1,124	1,580	13.3	5.5	7.8
1902.....	2,626	1,092	1,534	12.7	5.3	7.4
1903.....	2,778	1,153	1,625	13.2	5.5	7.7
1904.....	3,216	1,403	1,813	15.1	6.6	8.5
1905.....	3,219	1,401	1,818	14.8	6.4	8.4
1906.....	3,229	1,302	1,927	14.5	5.9	8.7
1907.....	3,448	1,476	1,972	15.2	6.5	8.7
1908.....	3,343	1,431	1,912	14.4	6.2	8.2
1909.....	3,422	1,453	1,969	14.5	6.1	8.3
1910.....	3,641	1,624	2,017	15.1	6.7	8.4
1911.....	3,806	1,748	2,058	15.5	7.1	8.4
1912.....	3,527	1,488	2,039	14.1	6.0	8.2
1913.....	3,789	1,661	2,128	14.9	6.5	8.4

<sup>1</sup> Calendar year, unless otherwise specified.<sup>2</sup> Census year ending May 31.<sup>3</sup> Figures for puerperal septicemia for the census year 1900 not comparable with those for later years. See p. 41.

TABLE IV.—Death rates per 100,000 female population in the 11 States within the death-registration area in 1900 from diseases caused by pregnancy and confinement, 1900 to 1910.

Year.	Death rate per 100,000 female population from diseases caused by pregnancy and confinement.			Year.	Death rate per 100,000 female population from diseases caused by pregnancy and confinement.		
	Total.	Puerperal septi-cemia.	All other.		Total.	Puerperal septi-cemia.	All other.
1900.....	26.9	11.6	15.3	1906.....	29.2	11.8	17.5
1901.....	26.7	11.1	15.6	1907.....	30.6	13.1	17.5
1902.....	25.5	10.6	14.9	1908.....	29.1	12.4	16.6
1903.....	26.6	11.0	15.5	1909.....	29.2	12.4	16.6
1904.....	30.3	13.2	17.1	1910.....	30.4	13.6	16.9
1905.....	29.8	13.0	16.8				

TABLE V.—*Number of deaths of women from 15 to 44 years of age in the death-registration area from each cause and class of causes included in the abridged International List of Causes of Death (revision of 1909),<sup>1</sup> 1913.*

[Computed from figures in Mortality Statistics, 1913, pp. 338 to 349, in which causes of death are given according to the detailed International List of Causes of Death.]

Abridged International List No.	Cause of death.	Number of deaths.
13, 14, 15 31, 32	Tuberculosis of the lungs, tuberculous meningitis, other forms of tuberculosis.....	26, 265
19	Puerperal septicemia (puerperal fever, peritonitis) and other puerperal accidents of pregnancy and labor.....	9, 876
29	Organic diseases of the heart.....	6, 386
16	Acute nephritis and Bright's disease.....	5, 741
22	Cancer and other malignant tumors.....	5, 065
35	Pneumonia.....	4, 167
1	Violent deaths (suicide excepted).....	3, 262
30	Typhoid fever.....	2, 706
26	Noncancerous tumors and other diseases of the female genital organs.....	2, 669
36	Appendicitis and typhlitis.....	1, 620
23	Suicide.....	1, 562
18	Other diseases of the respiratory system (tuberculosis excepted).....	1, 458
24	Cerebral hemorrhage and softening.....	1, 398
27	Diseases of the stomach (cancer excepted).....	940
26	Hernia, intestinal obstruction.....	854
9	Cirrhosis of the liver.....	596
17	Influenza.....	449
8	Simple meningitis.....	444
12	Diphtheria and croup.....	336
6	Other epidemic diseases.....	312
5	Scarlet fever.....	307
3	Measles.....	304
21	Malaria.....	250
20	Chronic bronchitis.....	144
33	Acute bronchitis.....	90
11	Congenital debility and malformations.....	24
4	Cholera nostras.....	15
7	Smallpox.....	16
2	Whooping cough.....	9
10	Typhus fever.....	2
37	Asiatic cholera.....	11, 648
38	Other diseases.....	458
	Unknown or ill-defined diseases.....	458

<sup>1</sup> Except No. 25, diarrhea and enteritis (under 2 years), and No. 34, senility.



TABLE VII.—*Death rates per 100,000 population in the death-registration area from certain important causes of death, 1890 and 1900 to 1913.*

Year. <sup>1</sup>	Death rate per 100,000 population from—										
	Ty-phoid fever.	Diph-theria and croup.	Meas-les.	Whoop-ing cough.	Scar-let fever.	Tuber-culosis (all forms).	Pneu-monia (all forms).	Diar-rhea and enter-itis (under 2 yrs.).	Diseases caused by pregnancy and confinement.		
									Total.	Puer-peral Septi-cemia.	All other.
1890 <sup>2</sup> .....	46.3	97.8	13.5	15.8	13.6	252.0	186.9	139.1	15.3	7.0	8.3
1900 <sup>2</sup> .....	33.8	45.2	13.2	12.7	11.6	190.9	192.0	97.5	13.1	5.6	7.5
1900.....	35.9	43.3	12.5	12.1	10.2	201.9	180.5	108.8	13.3	5.7	7.6
1901.....	32.3	34.0	7.3	9.7	13.1	196.9	161.4	90.9	13.7	6.0	7.7
1902.....	34.3	30.8	9.5	12.0	12.6	184.5	155.7	84.0	13.0	5.7	7.3
1903.....	34.1	31.7	9.8	15.8	12.2	188.5	155.1	81.6	14.0	6.1	7.9
1904.....	31.7	28.3	11.0	6.5	10.8	200.7	171.4	90.9	15.3	6.9	8.5
1905.....	27.8	23.6	7.5	10.6	6.7	192.3	148.8	97.0	14.9	6.8	8.1
1906.....	31.3	25.7	12.1	15.1	7.7	180.2	145.5	101.4	15.1	6.2	8.9
1907.....	29.5	23.6	10.0	11.3	10.0	178.5	156.5	96.6	15.6	6.8	8.9
1908.....	24.3	21.5	9.9	10.6	11.9	167.6	130.9	95.2	15.7	7.0	8.7
1909.....	21.1	20.4	9.6	9.6	11.4	160.8	137.6	87.8	15.3	6.7	8.6
1910.....	23.5	21.4	12.3	11.4	11.6	160.3	147.7	100.8	15.7	7.2	8.5
1911.....	21.0	18.9	10.0	11.3	8.8	158.9	133.7	77.4	16.0	7.4	8.6
1912.....	16.5	18.2	7.0	9.3	6.7	149.5	132.3	70.3	15.0	6.5	8.5
1913.....	17.9	18.8	12.8	10.0	8.7	147.6	132.4	75.2	15.8	7.2	8.6

<sup>1</sup> Calendar year, unless otherwise specified.<sup>2</sup> Census year ending May 31.<sup>3</sup> Figures for puerperal septicemia for the census years 1890 and 1900 not comparable with those for later years. See p. 41.TABLE VIII.—*Deaths and death rates per 100,000 population in cities of at least 8,000<sup>1</sup> population and in smaller cities and rural districts in the death-registration States from diseases caused by pregnancy and confinement, 1900 to 1913.*

Year.	Deaths from diseases caused by pregnancy and confinement.											
	Number.						Rate per 100,000 population.					
	Total.		Puerperal septicemia.		All other.		Total.		Puerperal septicemia.		All other.	
	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.	Cities of at least 8,000 population.	Cities of less than 8,000 population and rural districts.
1900.....	1,595	1,087	713	442	882	645	14.9	11.7	6.7	4.8	8.3	6.9
1901.....	1,607	1,097	661	463	946	634	14.4	12.0	5.9	5.1	2.5	7.0
1902.....	1,575	1,051	710	382	865	669	13.7	11.5	6.2	4.2	7.5	7.3
1903.....	1,659	1,119	715	438	944	681	14.1	12.1	6.2	4.4	8.0	7.4
1904.....	1,968	1,248	892	511	1,076	737	16.4	13.4	7.4	5.5	8.9	7.9
1905.....	2,068	1,150	937	464	1,132	686	16.8	12.3	7.6	5.0	9.1	7.3
1906.....	3,080	2,063	1,306	761	1,752	1,302	16.8	13.2	7.2	4.9	9.6	8.3
1907.....	3,245	2,145	1,427	821	1,818	1,324	17.3	13.5	7.6	5.2	9.7	8.3
1908.....	3,384	2,654	1,532	1,085	1,852	1,509	16.6	14.5	7.5	5.9	9.1	8.6
1909.....	3,734	2,886	1,678	1,212	2,056	1,724	16.2	13.8	7.3	5.7	8.9	8.1
1910.....	4,271	3,123	2,029	1,305	2,242	1,818	17.0	13.8	8.1	5.8	8.9	8.0
1911.....	4,543	3,926	2,202	1,678	2,341	2,248	16.5	14.6	8.0	6.2	8.5	8.4
1912.....	4,463	3,651	1,997	1,417	2,466	2,134	15.9	13.1	7.1	5.2	8.8	7.9
1913.....	5,031	4,013	2,353	1,717	2,678	2,206	17.2	13.8	8.0	5.9	9.2	7.9

<sup>1</sup> For the years 1900 to 1909, inclusive, basis of division was 8,000 according to the census of 1900; for the years 1910 to 1913, inclusive, basis of division was 10,000 according to the census of 1910.

TABLE IX.—Death rates per 100,000 population in cities that had at least 200,000 population in 1900, and were within the death-registration States of 1900, from diseases caused by pregnancy and confinement, 1900 to 1913.

Year.	Boston.	Buffalo.	Detroit.	Jersey City.	New York.	Newark.	Washington.
1900.....	18.5	9.1	24.7	15.9	19.3	12.6	15.4
1901.....	13.4	15.3	19.5	16.0	17.7	14.8	23.6
1902.....	14.7	12.5	15.7	16.4	16.4	16.8	15.2
1903.....	17.4	18.1	15.0	12.0	15.7	9.7	14.0
1904.....	15.8	16.0	16.3	17.3	19.0	14.6	17.6
1905.....	14.1	12.9	16.7	17.6	20.3	16.3	17.7
1906.....	15.0	20.4	15.7	18.4	18.3	18.1	17.0
1907.....	15.9	19.8	17.1	11.6	18.9	16.9	16.8
1908.....	12.1	16.1	18.5	24.2	17.1	20.0	17.7
1909.....	20.7	13.4	14.6	15.6	16.3	19.7	17.1
1910.....	14.0	12.5	20.6	17.1	16.7	18.0	21.1
1911.....	19.4	10.2	21.6	21.8	15.8	19.8	16.9
1912.....	17.9	13.0	17.7	18.1	14.8	20.6	14.0
1913.....	20.6	13.9	26.5	18.1	14.1	23.2	15.1

TABLE X.—Death rates per 100,000 population in the 11 States within the death-registration area in 1900 from diseases caused by pregnancy and confinement, 1900 to 1913.

Death rate per 100,000 population from diseases caused by pregnancy and confinement.												
Year.	Connecticut.			District of Columbia.			Indiana.			Maine.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1900.....	13.0	5.7	7.3	15.4	5.4	10.0	10.4	4.8	5.6	9.4	3.0	6.3
1901.....	11.9	4.4	7.5	22.6	10.5	13.0	10.2	5.0	5.2	11.0	4.1	6.9
1902.....	13.4	5.0	8.4	15.2	5.9	9.3	9.0	3.8	5.2	15.2	6.1	9.1
1903.....	13.2	4.4	8.7	18.0	9.2	8.8	10.5	5.4	5.1	13.1	3.9	9.2
1904.....	13.2	4.8	8.4	17.6	8.0	9.7	12.3	5.8	6.4	12.7	5.3	7.4
1905.....	15.0	5.7	9.3	17.7	6.2	11.5	12.3	6.5	5.7	11.7	5.1	6.5
1906.....	13.6	5.4	8.2	17.0	7.7	9.3	11.2	4.8	6.3	10.1	2.3	7.7
1907.....	13.4	6.4	7.0	16.8	7.3	9.5	13.3	7.1	6.3	10.8	4.3	6.6
1908.....	11.7	4.3	7.4	17.7	4.7	13.1	13.2	6.1	7.0	11.2	4.1	7.1
1909.....	13.1	4.1	9.0	17.1	7.6	9.5	14.5	7.2	7.3	10.6	4.6	6.0
1910.....	13.2	5.8	7.4	21.1	12.0	9.0	16.6	8.8	7.8	14.8	6.2	8.6
1911.....	11.3	5.0	6.3	16.9	7.4	9.5	17.7	10.9	6.8	13.4	3.9	9.5
1912.....	15.2	5.3	9.9	14.0	4.4	9.6	16.5	8.7	7.8	10.1	2.8	7.3
1913.....	12.1	4.7	7.4	18.1	6.9	11.2	15.1	8.0	7.2	11.3	3.7	7.7
Annual average, 1900 to 1913.....	13.1	5.1	8.0	17.6	7.4	10.2	13.1	6.7	6.4	11.6	4.2	7.6

TABLE X.—*Death rates per 100,000 population in the 11 States within the death-registration area in 1900 from diseases caused by pregnancy and confinement, 1900 to 1913—Continued.*

Year.	Death rate per 100,000 population from diseases caused by pregnancy and confinement—Continued.											
	Massachusetts.			Michigan.			New Hampshire.			New Jersey.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1900	11.1	3.7	7.4	18.5	8.8	9.7	8.0	2.4	5.6	12.8	4.9	7.9
1901	9.4	3.2	6.2	19.0	9.1	9.9	7.0	3.1	3.9	9.9	3.8	6.1
1902	9.5	3.1	6.4	18.1	7.7	10.4	6.7	2.6	4.1	11.0	4.8	6.2
1903	11.7	4.0	7.7	16.7	7.4	9.3	10.5	3.8	6.7	11.5	4.6	6.9
1904	13.3	4.5	8.8	19.8	8.6	11.2	9.1	3.3	5.7	12.7	6.3	6.4
1905	11.9	4.0	7.9	14.8	6.2	8.6	12.6	3.3	9.3	13.3	6.2	7.0
1906	12.5	3.9	8.5	16.3	6.4	9.9	14.9	5.0	9.9	14.6	6.2	8.3
1907	12.8	4.3	8.4	15.7	6.4	9.3	10.6	3.1	7.5	13.1	5.2	7.8
1908	11.0	4.0	6.9	16.9	6.9	10.0	10.1	2.3	7.7	14.5	7.1	7.5
1909	14.6	5.1	9.4	15.0	6.9	8.2	13.1	4.4	8.6	12.7	5.7	7.0
1910	12.2	4.9	7.3	16.8	7.0	9.9	12.1	4.2	7.9	15.5	7.5	8.1
1911	14.8	6.1	8.7	17.5	8.5	9.0	13.6	4.2	9.5	16.1	7.7	8.4
1912	13.1	5.3	7.8	14.7	6.2	8.5	15.2	5.1	10.1	15.2	6.1	9.2
1913	14.4	5.3	9.1	19.7	9.3	10.4	13.5	4.1	9.4	16.2	7.8	8.4
Annual average, 1900 to 1913	12.4	4.4	7.9	17.1	7.5	9.6	11.2	3.7	7.6	13.7	6.1	7.6

Year.	New York.			Rhode Island.			Vermont.		
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.	Total.	Puer-peral septi-cemia.	All other.
1900	14.1	6.5	7.6	20.8	8.4	12.4	13.4	4.9	8.4
1901	15.1	6.2	8.9	18.9	6.8	12.1	9.6	2.9	6.7
1902	13.7	6.0	7.7	15.8	7.1	8.7	11.3	3.8	7.5
1903	14.0	6.0	8.0	13.5	5.9	7.6	14.7	3.5	11.2
1904	16.0	7.3	8.7	20.6	10.6	10.0	16.9	5.4	11.5
1905	14.9	7.8	9.1	20.8	8.9	11.8	18.9	4.3	14.6
1906	15.9	7.0	9.0	17.8	6.9	10.9	15.9	4.0	12.0
1907	17.1	7.7	9.4	19.5	8.1	11.4	27.0	7.1	19.9
1908	15.7	7.2	8.5	16.7	6.0	10.8	18.9	6.2	12.7
1909	14.9	6.3	8.7	15.4	7.3	8.1	18.9	9.0	9.9
1910	15.1	6.7	8.4	15.0	5.0	10.1	17.1	6.2	10.9
1911	15.0	6.6	8.4	15.9	5.2	10.8	13.7	4.5	9.2
1912	13.5	6.0	7.6	14.1	5.1	9.0	13.7	2.2	11.4
1913	14.0	6.2	7.8	12.6	4.0	8.6	15.3	4.7	10.6
Annual average, 1900 to 1913	15.1	6.7	8.4	16.8	6.7	10.1	16.1	4.9	11.2

TABLE XI.—Deaths and death rates per 100,000 population in the death-registration area from diseases caused by pregnancy and confinement, by color of decedent, 1910 to 1913.

Year.	Deaths from diseases caused by pregnancy and confinement.											
	Number.						Rate per 100,000 population.					
	Total.		Puerperal septicaemia.		All other.		Total.		Puerperal septicaemia.		All other.	
	White.	Colored.	White.	Colored.	White.	Colored.	White.	Colored.	White.	Colored.	White.	Colored.
1910.....	7,902	553	3,609	283	4,293	270	15.3	25.6	7.0	13.1	8.3	12.5
1911.....	8,783	673	4,038	338	4,745	335	15.5	26.8	7.1	13.5	8.4	13.3
1912.....	8,365	670	3,580	325	4,785	345	14.5	26.0	6.2	12.6	8.3	13.4
1913.....	9,167	843	4,170	372	4,997	471	15.2	26.1	6.9	11.5	8.3	14.6

TABLE XII.—Average death rates per 100,000 population in certain countries from diseases caused by pregnancy and confinement, 1900 to 1910.

Country.	Death rate per 100,000 population from diseases caused by pregnancy and confinement.			Country.	Death rate per 100,000 population from diseases caused by pregnancy and confinement.		
	Total.	Puerperal septicaemia.	All other.		Total.	Puerperal septicaemia.	All other.
Sweden <sup>1</sup> .....	6.0	2.4	3.5	Japan <sup>1</sup> .....	13.3	4.5	8.8
Norway.....	8.1	4.1	3.9	Australia <sup>2</sup> .....	14.1	4.7	9.4
Italy.....	8.9	3.3	5.7	Belgium <sup>3</sup> .....	14.8	5.8	9.0
France <sup>4</sup> .....	10.3	4.8	5.5	Scotland <sup>5</sup> .....	14.8	5.5	9.4
Prussia <sup>6</sup> .....	10.4	4.7	5.8	United States <sup>6</sup> .....	14.9	6.5	8.3
England and Wales.....	11.1	4.7	6.5	Switzerland.....	15.2	6.4	8.8
New Zealand.....	12.4	3.1	9.3	Spain <sup>1</sup> .....	19.6	12.3	7.3
Ireland <sup>4</sup> .....	12.9	4.5	8.4	Austria.....	( <sup>7</sup> )	6.6	( <sup>7</sup> )
Hungary.....	13.3	3.6	9.8				

<sup>1</sup> Rates based on figures for 1901 to 1910.<sup>2</sup> Rates based on figures for 1906 to 1910.<sup>3</sup> Rates based on figures for 1903 to 1910.<sup>4</sup> Rates based on figures for 1902 to 1910.<sup>5</sup> Rates based on figures for 1907 to 1910.<sup>6</sup> Rates based on figures for death-registration area which increased from year to year; in 1900 it comprised 40.5 per cent of the total population of the United States and in 1910, 58.3 per cent.<sup>7</sup> Figures not available.

TABLE XIII.—Average death rates per 1,000 live births in certain foreign countries from diseases caused by pregnancy and confinement, 1900 to 1910.

Country.	Death rate per 1,000 live births from diseases caused by pregnancy and confinement.			Country.	Death rate per 1,000 live births from diseases caused by pregnancy and confinement.		
	Total.	Puerperal septicaemia.	All other.		Total.	Puerperal septicaemia.	All other.
Sweden <sup>1</sup> .....	2.3	0.9	1.4	France <sup>2</sup> .....	5.2	2.4	2.8
Italy.....	2.7	1.0	1.7	Scotland <sup>1</sup> .....	5.2	1.9	3.3
Norway.....	2.9	1.5	1.4	Australia <sup>3</sup> .....	5.3	1.8	3.5
Prussia <sup>4</sup> .....	3.2	1.4	1.8	Ireland <sup>5</sup> .....	5.5	1.9	3.6
Hungary.....	3.6	1.0	2.6	Switzerland.....	5.6	2.4	3.2
England and Wales.....	4.1	1.7	2.4	Spain <sup>1</sup> .....	5.7	3.6	2.1
Japan <sup>1</sup> .....	4.1	1.4	2.7	Belgium <sup>2</sup> .....	5.8	2.3	3.5
New Zealand.....	4.6	1.2	3.5	Austria.....	( <sup>6</sup> )	1.9	( <sup>6</sup> )

<sup>1</sup> Rates based on figures for 1901 to 1910.<sup>2</sup> Rates based on figures for 1903 to 1910.<sup>3</sup> Rates based on figures for 1906 to 1910.<sup>4</sup> Rates based on figures for 1907 to 1910.<sup>5</sup> Rates based on figures for 1902 to 1910.<sup>6</sup> Figures not available.



TABLE XIV.—Deaths in certain countries from diseases caused by pregnancy and confinement and number and per cent of such deaths from puerperal septicemia, 1900 to 1910.

Country.	Deaths from diseases caused by pregnancy and confinement.			Country.	Deaths from diseases caused by pregnancy and confinement.		
	Total.	Puerperal septi- cemia.			Total.	Puerperal septi- cemia.	
		Num- ber.	Per cent.			Num- ber.	Per cent.
Sweden <sup>1</sup> .....	3, 179	1, 294	40. 7	Hungary.....	29, 273	7, 824	26. 7
Norway.....	2, 032	1, 041	51. 2	Japan <sup>1</sup> .....	63, 908	21, 494	33. 6
Italy.....	32, 651	11, 901	36. 4	Australia <sup>2</sup> .....	2, 388	800	33. 5
France <sup>3</sup> .....	20, 217	9, 424	46. 6	Belgium <sup>3</sup> .....	8, 588	3, 392	39. 5
Prussia <sup>3</sup> .....	31, 680	14, 151	44. 7	Scotland <sup>1</sup> .....	6, 839	2, 522	36. 9
England and Wales.....	41, 691	17, 433	41. 8	United States <sup>4</sup> .....	63, 969	28, 176	44. 0
New Zealand.....	1, 190	300	25. 2	Switzerland.....	5, 897	2, 485	42. 1
Ireland <sup>4</sup> .....	5, 109	1, 792	35. 1	Spain <sup>1</sup> .....	37, 504	23, 557	62. 8

<sup>1</sup> Figures for 1901 to 1910.<sup>2</sup> Figures for 1906 to 1910.<sup>3</sup> Figures for 1903 to 1910.<sup>4</sup> Figures for 1902 to 1910.<sup>5</sup> Figures for 1907 to 1910.<sup>6</sup> Figures for death-registration area which increased from year to year; in 1900 it comprised 40.5 per cent of the total population of the United States and in 1910, 58.3 per cent.

## COMMENT ON SOURCES OF STATISTICS FOR FOREIGN COUNTRIES.

The following paragraphs present, by countries, the sources of the figures subsequent to 1910 in Table XV for foreign countries and also notes on certain of these figures which call for comment or explanation. Unless otherwise specified the figures for all countries for the years 1900 to 1910, inclusive, are taken from the *Statistique Internationale du Mouvement de la Population d'après les Registres de l'Etat Civil*, of the Bureau de la statistique générale de la France. The figures for 1900 come from the volume published in 1907; those for 1901 to 1910 from that published in 1913.

These foreign sources were used only for the figures in columns 1, 3, 4, 9, and 13, from which the figures in columns 2, 5, 6, 7, 8, 10, 11, 12, 14, 15, and 16 were computed. Blank spaces indicate that statistics were not available. Similarly, where a table begins with data for a year subsequent to 1900, it indicates that the figures for the earlier years were not available, unless otherwise noted.

*Australia* (p. 60).—Bureau of census and statistics. Population and vital statistics. Bulletins 29 and 30. 1911-1912.

*Austria* (p. 60).—Statistisches Centralcomission. Österreichisches statistisches Handbuch für die im Reichsrathe vertretenen Königreiche und Länder. Nebst einem Anhang für die gemeinsamen Angelegenheiten der österreichisch-ungarischen Monarchie. Hrg. von der statistischen Centralcomission. XXXI Jahrgang. 1911.

The statistics for Austria give the deaths from puerperal septicemia only. The figures for deaths from other diseases of pregnancy and confinement were not available.

The population for 1911 could not be secured from official publications, and was therefore estimated. In making this estimate, one-tenth of the increase from 1900 to 1910 was added to the figure for 1910.

*Belgium.* (p. 60).—Ministère de l'intérieur et de l'instruction publique. *Annuaire statistique de la Belgique.* 1912-13.

The population is that estimated as of December 31 of each year.

Belgium classifies stillbirths as "mort-nés et autres enfants présentés sans vie."

*England and Wales* (p. 61).—74th-77th annual reports of the registrar general of births, deaths, and marriages in England and Wales, 1911 to 1914.

Several points should be noted in the figures for England and Wales.

I. The registrar general's reports, prior to 1911, grouped deaths from diseases of pregnancy and confinement into the two large groups "puerperal septic diseases" and "diseases of pregnancy and childbirth (not septic)," and included phlegmasia alba dolens in puerperal septic diseases. For the years 1900 to 1910 the figures used are those given by the *Statistique Internationale*. The deaths from phlegmasia alba dolens have apparently been subtracted from puerperal septic diseases and have been added to the other group, thus making the classification conform more nearly to the international nomenclature. Therefore, while the figures for "deaths from all diseases caused by pregnancy and confinement" will agree with the official English figures, those for the two other groups, prior to 1911, will not.

II. As the registrar general's report for 1914 gives a table of deaths for the years 1900 to 1914 according to the detailed list of causes of death in use prior to 1911, this table has been used as the source for the figures for England and Wales after 1910, so that the statistics after 1910 can be compared with those of earlier years.

The number of deaths from puerperal septicemia for the years after 1910 is slightly lower when the deaths are classified according to the International Classification than when they are classified according to the older method, as given in table for England and Wales. The deaths from other diseases of pregnancy and confinement are, of course, correspondingly higher. This difference can be seen from the following:

*Number of deaths from puerperal septicemia.*

Year.	According to the International Classification.	According to the classification in use prior to 1911.
1911.....	1,262	1,267
1912.....	1,216	1,223
1913.....	1,108	1,119
1914.....	1,365	1,372

III. The International Classification was not used in England until 1911, and deaths from puerperal nephritis and albuminuria were not distinguished as puerperal until after 1910. For England and Wales, therefore, the figures are presented for 1911 to 1914, inclusive, in two ways: (a) According to use in England prior to 1911, excluding deaths from puerperal nephritis and albuminuria; and (b) including deaths from puerperal nephritis and albuminuria.

The number of these deaths was as follows:

*Deaths from puerperal nephritis and albuminuria.*

Year:	
1911.....	177
1912.....	174
1913.....	221
1914.....	193

*Hungary* (p. 61).—*Statisztikai hivatal. Magyar statisztikai evkönyv.* 1911.

The figures given for Hungary include those for Fiume and Croatia-Slavonia.

*Ireland* (p. 62).—51st detailed annual report of the registrar general of marriages, births, and deaths in Ireland in 1914.

I. The registrar general's reports for Ireland, up through 1914, classify deaths from diseases of pregnancy and confinement into two large groups—puerperal septic diseases and diseases of pregnancy and childbirth (not septic), and include phlegmasia alba dolens in puerperal septic diseases. This was the method used in England and Wales prior to 1911. See note on England and Wales.

In the figures for Ireland, given by the *Statistique Internationale*, apparently no correction has been made as in the case of England and Wales, but in the table here given the figures have been corrected to make them comparable with those for England and Wales and for other countries. To make this correction the deaths from phlegmasia alba dolens were subtracted from deaths from puerperal septic diseases and added to the other group. Thus while the figures for "deaths from all diseases of pregnancy and confinement" will agree with the official Irish figures and with those given in the *Statistique Internationale*, those for the other two groups will not.

II. The figures for 1900 and for 1901 are not given because in those years the registrar general's reports did not include under puerperal septic diseases either pyemia or septicemia.

*Italy* (p. 62).—Direzione generale della statistica. Statistica delle cause di morte. 1911-1913.

Movimento de la popolazione. 1913.

Only columns 1, 3, and 4 for 1900 to 1910 were taken from the *Statistique Internationale*. The above original Italian sources were used, as in the *Statistique Internationale* the deaths from "other diseases of pregnancy and confinement" and the deaths from "noncancerous tumors and other diseases of the female genital organs" were added together, for several years. (The figures here given were probably not available when the *Statistique Internationale* was published.)

*Japan* (p. 63).—Bureau de la statistique générale. Mouvement de la population de l'empire du Japon for 1911 and 1912.

The population is that estimated as of December 31 of each year.

*New Zealand* (p. 63).—Registrar general's office. Statistics of the Dominion of New Zealand. 1911-1914.

*Norway* (p. 63).—Statistiske centralbureau. Statistisk aarbok for kongeriget Norge. 1914.

The population for 1911 and 1912 is that estimated as of December 31.

*Scotland* (p. 64).—57th-60th annual reports of the registrar general for Scotland. 1911-1914.

The registrar general's reports for Scotland prior to 1911, like those of England and Wales and Ireland, included phlegmasia alba dolens under puerperal septic diseases. As in the case of Ireland, the figures given by the *Statistique Internationale* have apparently not been corrected. However, in the table here given the figures have been corrected by the method described above in the comment on the statistics for Ireland.

*Sweden* (p. 65).—Statistiska centralbyrån. Statistisk årsbok för Sverige. 1915.

The population is that estimated as of December 31 of each year.

*Switzerland* (p. 65).—Statistisches Bureau. Statistisches Jahrbuch der Schweiz. 1914.

## MATERNAL MORTALITY.

TABLE XV.—Population, births, deaths, and death rates per 100,000 population, per 1,000 births, and per 1,000 live births from diseases caused by pregnancy and confinement in certain foreign countries for specified years.

Country and year.	Population July 1 each year (estimated).	Births.			Deaths from diseases caused by pregnancy and confinement.											
		Total.	Live births.	Still-births.	Total.			Puerperal septicæmia.						All other.		
					Rate.			Number.	Rate.			Number.	Rate.			
					Per 100,000 population.	Per 1,000 births.	Per 1,000 live births.		Per 100,000 population.	Per 1,000 births.	Per 1,000 live births.		Per 100,000 population.	Per 1,000 births.	Per 1,000 live births.	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
Australia:																
1907.....	4,124,000		110,347		614	14.9		5.6	179	4.3		1.6	435	10.5		3.9
1908.....	4,194,000		111,545		606	14.4		5.4	202	4.8		1.8	404	9.6		3.6
1909.....	4,276,000		114,071		577	13.5		5.1	201	4.7		1.8	376	8.8		3.3
1910.....	4,370,000		116,801		591	13.5		5.1	218	5.0		1.9	373	8.5		3.2
1911.....	4,490,000		122,193		615	13.7		5.0	209	4.7		1.7	406	9.0		3.3
1912.....	4,645,000		133,088		644	13.9		4.8	231	5.0		1.7	413	8.9		3.1
Austria:																
1900.....	25,976,000	995,537	967,939	27,598					1,932	7.5	2.0	2.0				
1901.....	26,279,000	988,985	961,501	27,484					1,944	7.4	2.0	2.0				
1902.....	26,535,000	1,010,843	984,240	26,603					1,922	7.2	1.9	2.0				
1903.....	26,780,000	999,960	943,953	26,007					1,780	6.6	1.8	1.9				
1904.....	27,021,000	987,425	961,430	25,995					1,911	7.1	1.9	2.0				
1905.....	27,229,000	945,978	921,764	24,214					1,622	6.0	1.7	1.8				
1906.....	27,448,000	987,166	961,258	25,908					1,692	6.2	1.7	1.8				
1907.....	27,706,000	966,911	942,169	24,742					1,609	5.8	1.7	1.7				
1908.....	27,950,000	965,593	941,375	24,218					1,822	6.5	1.9	1.9				
1909.....	28,186,000	966,096	941,239	23,897					1,734	6.2	1.8	1.8				
1910.....	28,427,000	946,820	923,545	23,275					1,770	6.2	1.9	1.9				
1911.....	28,672,000	920,945	898,702	22,243					1,712	6.0	1.9	1.9				
Belgium:																
1900.....	6,694,000	202,780	193,789	9,001	1,046	15.6	5.2	5.4								
1901.....	6,800,000	209,340	200,077	9,263	1,055	15.5	5.0	5.3								
1902.....	6,886,000	204,846	195,871	8,975	1,080	15.7	5.3	5.5								
1903.....	6,965,000	200,870	192,301	8,569	1,205	17.3	6.0	6.3	432	6.2	2.2	2.2	773	11.1	3.8	4.0
1904.....	7,075,000	200,333	191,721	8,612	1,179	16.7	5.9	6.1	445	6.3	2.2	2.3	734	10.4	3.7	3.8



## MATERNAL MORTALITY.

TABLE XV.—Population, births, deaths, and death rates per 100,000 population, per 1,000 births, and per 1,000 live births from diseases caused by pregnancy and confinement in certain foreign countries for specified years—(Continued.)

Country and year.	Population July 1 each year (estimated).	Births.			Deaths from diseases caused by pregnancy and confinement.											
		Total.	Live births.	Still-births.	Total.			Puerperal septicæmia.								
					Rate.			Rate.								
					Number.	Per 100,000 population.	Per 1,000 births.	Number.	Per 100,000 population.	Per 1,000 live births.						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
<b>Hungary—Continued.</b>																
1908.	20,426,000	771,126	755,588	15,235	2,892	14.2	3.8	3.8	889	4.4	1.2	1.2	2,003	9.8	2.6	2.6
1909.	20,605,000	782,354	776,385	15,959	2,899	13.8	3.6	3.7	991	4.7	1.2	1.2	1,878	9.1	2.4	2.4
1910.	20,793,000	788,560	782,890	15,667	2,606	12.1	3.3	3.4	793	3.8	1.0	1.1	1,713	8.2	2.3	2.3
1911.	20,985,000	797,918	792,767	15,149	2,443	11.7	3.3	3.3	869	4.1	1.2	1.2	1,574	7.5	2.1	2.1
<b>Ireland:</b>																
1902.	4,434,000		101,863	635	14.3			6.2	214	4.8		2.1	421	9.5		4.1
1903.	4,416,000		101,831	573	13.0			5.6	222	5.0		2.2	351	7.9		3.4
1904.	4,403,000		102,811	583	13.2			5.6	296	4.7		2.0	377	8.6		3.6
1905.	4,396,000		102,832	573	13.0			5.6	217	4.9		2.1	366	8.1		3.5
1906.	4,383,000		103,530	607	13.8			5.9	218	5.0		2.1	389	8.9		3.8
1907.	4,383,000		101,742	505	11.5			5.0	152	3.5		1.5	353	8.1		3.5
1908.	4,379,000		102,069	680	12.1			5.2	178	4.1		1.7	352	8.0		3.4
1909.	4,380,000		102,769	561	12.8			5.5	307	4.7		2.0	364	8.1		3.4
1910.	4,378,000		101,963	543	12.4			5.3	178	4.1		1.7	364	8.3		3.6
1911.	4,384,000		101,768	514	11.7			5.1	166	3.8		1.6	349	8.0		3.4
1912.	4,385,000		101,038	549	12.5			5.4	187	4.3		1.9	362	8.3		3.6
1913.	4,379,000		100,004	537	12.0			5.3	163	3.7		1.6	364	8.3		3.6
1914.	4,381,000		99,906	497	11.3			5.0	182	4.2		1.8	315	7.2		3.2
<b>Italy:</b>																
1900.	32,346,000	1,113,063	1,067,870	45,079	3,034	9.4	2.7	2.8	1,083	3.2	.9	1.0	2,001	6.2	1.8	1.9
1901.	32,533,000	1,104,017	1,057,763	46,254	2,707	8.5	2.5	2.6	994	3.1	.9	.9	1,773	5.4	1.6	1.7
1902.	32,700,000	1,141,749	1,095,074	46,675	2,907	8.6	2.5	2.6	1,037	3.2	.9	.9	1,770	5.4	1.6	1.6
1903.	32,840,000	1,088,797	1,042,090	46,707	2,771	8.4	2.5	2.7	1,113	3.4	1.0	1.1	1,699	5.1	1.5	1.6
1904.	33,016,000	1,134,552	1,082,431	46,121	2,981	9.0	2.6	2.7	1,082	3.3	1.0	1.0	1,899	5.8	1.7	1.7

1905.....	33,193,000	1,133,979	1,084,518	49,461	3,198	9.6	2.8	2.9	977	2.9	-9	-9	2.21	6.7	2.0	2.0
1906.....	33,325,000	1,119,131	1,070,578	48,153	2,791	8.4	2.5	2.6	1,021	3.1	-9	1.0	1,770	5.3	1.6	1.7
1907.....	33,615,000	1,110,356	1,062,333	48,023	3,074	9.2	2.8	2.9	1,147	3.4	1.0	1.1	1,027	5.7	1.7	1.8
1908.....	33,827,000	1,100,278	1,138,813	53,815	3,815	9.8	2.8	2.9	1,245	3.7	1.0	1.1	2,070	6.1	1.7	1.8
1909.....	34,077,000	1,106,121	1,115,881	50,290	3,187	9.2	2.7	2.8	1,243	3.6	1.1	1.1	1,865	5.5	1.6	1.7
1910.....	34,377,000	1,194,747	1,144,410	50,337	2,786	8.1	2.3	2.4	1,011	2.9	-8	-9	1,775	5.2	1.5	1.6
1911.....	34,690,000	1,141,036	1,093,545	47,491	2,612	7.5	2.3	2.4	1,089	2.9	-8	-8	1,683	4.9	1.5	1.6
1912.....	35,026,000	1,181,553	1,133,985	47,743	2,743	7.8	2.3	2.4	1,089	2.6	-8	-8	1,844	5.0	1.6	1.6
1913.....	35,416,000	1,106,353	1,122,482	46,871	2,811	7.9	2.4	2.5	1,087	2.9	-9	-9	1,774	5.0	1.5	1.6
Japan:																
1901.....	45,437,000	1,657,060	1,501,591	155,489	6,071	14.7	4.0	4.4	1,885	4.1	1.1	1.3	4,786	10.5	2.9	3.2
1902.....	46,022,000	1,668,543	1,510,835	157,708	6,556	14.2	3.9	4.3	1,983	4.3	1.2	1.3	4,573	9.9	2.7	3.0
1903.....	46,733,000	1,643,736	1,499,816	153,920	6,071	13.0	3.7	4.1	2,028	4.3	1.2	1.4	4,043	8.7	2.5	2.7
1904.....	47,220,000	1,587,429	1,440,371	147,068	5,742	12.2	3.6	4.0	1,810	3.8	1.1	1.3	3,982	8.3	2.5	2.7
1905.....	47,678,000	1,594,802	1,432,770	142,092	6,185	13.0	3.9	4.3	1,878	3.9	1.2	1.3	4,307	9.0	2.7	3.0
1906.....	48,105,000	1,544,026	1,394,295	140,731	6,287	12.9	4.0	4.5	1,915	4.0	1.2	1.4	4,322	9.0	2.8	3.1
1907.....	48,820,000	1,773,286	1,614,472	188,814	6,728	13.8	3.8	4.2	2,284	4.7	1.3	1.4	4,434	9.1	2.5	2.7
1908.....	49,589,000	1,826,491	1,662,815	162,676	7,091	14.3	3.9	4.3	2,570	5.2	1.4	1.5	4,521	9.1	2.5	2.7
1909.....	50,254,000	1,858,426	1,683,850	161,576	6,399	12.7	3.4	3.8	2,575	5.1	1.4	1.5	3,924	7.6	2.1	2.3
1910.....	50,903,000	1,870,240	1,712,857	187,362	6,228	12.2	3.3	3.6	2,556	5.0	1.4	1.5	3,672	7.2	2.0	2.1
1911.....	51,435,000	1,803,122	1,747,803	185,319	6,192	12.0	3.3	3.5	2,512	4.9	1.3	1.4	3,680	7.2	1.9	2.1
1912.....	52,167,000	1,866,219	1,787,674	147,645	5,770	11.1	3.1	3.3	2,367	4.5	1.3	1.4	3,413	6.5	1.8	2.0
New Zealand:																
1900.....	764,000	.....	19,546	.....	75	9.8	.....	3.8	24	3.1	.....	1.2	51	6.7	.....	2.6
1901.....	778,000	.....	20,491	.....	90	11.6	.....	4.4	20	2.6	.....	1.0	70	9.0	.....	3.4
1902.....	798,000	.....	20,655	.....	110	13.8	.....	6.3	25	3.1	.....	1.2	85	10.7	.....	4.1
1903.....	829,000	.....	21,829	.....	128	15.6	.....	5.9	28	3.4	.....	1.3	100	12.2	.....	4.6
1904.....	845,000	.....	22,766	.....	106	12.5	.....	4.7	21	2.6	.....	-9	85	10.1	.....	3.7
1905.....	870,000	.....	23,682	.....	100	11.5	.....	4.2	21	2.4	.....	-9	79	9.1	.....	3.3
1906.....	886,000	.....	24,252	.....	94	10.5	.....	3.9	18	2.0	.....	-7	76	8.5	.....	3.1
1907.....	919,000	.....	25,094	.....	116	12.0	.....	4.6	29	3.2	.....	1.2	87	9.5	.....	3.6
1908.....	945,000	.....	25,940	.....	119	12.0	.....	4.6	40	4.9	.....	1.8	73	7.7	.....	3.8
1909.....	972,000	.....	26,524	.....	135	13.9	.....	5.1	33	3.4	.....	1.2	102	10.5	.....	3.8
1910.....	983,000	.....	26,984	.....	117	11.8	.....	4.5	35	3.5	.....	1.3	82	8.3	.....	3.2
1911.....	1,015,000	.....	26,354	.....	114	11.2	.....	4.3	37	2.7	.....	1.0	87	8.6	.....	3.3
1912.....	1,038,000	.....	27,508	.....	100	9.6	.....	3.6	19	1.8	.....	-7	81	7.8	.....	2.9
1913.....	1,099,000	.....	27,935	.....	100	9.4	.....	3.6	29	2.7	.....	1.0	71	6.6	.....	2.5
1914.....	1,090,000	.....	28,333	.....	118	10.8	.....	4.2	35	3.2	.....	1.2	83	7.6	.....	2.9
Norway:																
1900.....	2,200,000	67,765	66,149	1,616	184	8.4	2.7	2.8	111	5.0	1.6	1.7	73	3.3	1.1	1.1
1901.....	2,235,000	67,835	66,207	1,728	219	9.8	3.2	3.3	111	4.5	1.5	1.5	118	5.3	1.7	1.8
1902.....	2,255,000	66,854	66,262	1,592	207	9.2	3.1	3.2	109	4.8	1.6	1.7	94	4.3	1.6	1.5
1903.....	2,285,000	66,797	65,155	1,642	205	9.1	3.1	3.1	113	5.0	1.7	1.7	92	4.1	1.4	1.4
1904.....	2,274,000	65,523	63,685	1,578	199	8.8	3.0	3.1	106	4.7	1.6	1.6	93	4.1	1.4	1.5

1 Figure for Dec. 31.

TABLE XV.—Population, births, deaths, and death rates per 100,000 population, per 1,000 births, and per 1,000 live births from diseases caused by pregnancy and confinement in certain foreign countries for specified years—Continued.

Country and year.		Population each year (estimated).	Births.		Deaths from diseases caused by pregnancy and confinement.											
					Total.			Puerperal septikæmia.			All other.					
					Rate.			Rate.			Rate.					
					Per 100,000 popula- tion.	Per 1,000 births.	Per 1,000 live births.	Number.	Per 100,000 popula- tion.	Per 1,000 births.	Per 1,000 live births.	Number.	Per 100,000 popula- tion.	Per 1,000 births.	Per 1,000 live births.	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
Norway—Continued.																
1905.....	2,284,000	64,158	62,698	1,460	163	7.1	2.5	2.6	75	3.3	1.2	1.2	88	3.9	1.4	1.4
1906.....	2,294,000	62,743	61,316	1,427	152	6.6	2.4	2.5	78	3.4	1.2	1.3	74	3.2	1.2	1.3
1907.....	2,303,000	62,151	60,722	1,420	168	7.3	2.7	2.8	92	4.0	1.5	1.5	76	3.3	1.2	1.3
1908.....	2,318,000	62,286	60,866	1,420	183	7.9	2.9	3.0	98	4.2	1.6	1.6	86	3.7	1.4	1.4
1909.....	2,338,000	62,846	61,407	1,439	187	8.0	3.0	3.0	81	3.5	1.3	1.3	106	4.5	1.7	1.7
1910.....	2,342,000	62,890	61,461	1,429	165	7.0	2.6	2.7	77	3.3	1.2	1.3	88	3.7	1.4	1.4
1911.....	2,415,000	62,867	61,468	1,399	.....	.....	.....	.....	87	3.6	1.4	1.4	.....	.....	.....	.....
1912.....	2,439,000	62,581	61,151	1,430	.....	.....	.....	.....	90	3.7	1.4	1.5	.....	.....	.....	.....
Prussia:																
1900.....	34,254,000	1,275,712	1,235,719	39,993	4,074	11.9	3.2	3.3	.....	.....	.....	.....	.....	.....	.....	.....
1901.....	34,802,000	1,301,092	1,260,379	40,713	3,992	11.5	3.1	3.2	.....	.....	.....	.....	.....	.....	.....	.....
1902.....	35,360,000	1,295,914	1,255,686	40,228	4,090	11.5	3.1	3.2	1,986	5.5	1.6	1.6	2,134	5.9	1.7	1.7
1903.....	35,980,000	1,274,096	1,235,213	39,453	4,120	11.5	3.2	3.3	2,103	5.8	1.6	1.7	2,292	6.3	1.8	1.8
1904.....	36,484,000	1,304,697	1,264,534	40,163	4,395	12.0	3.4	3.5	.....	.....	.....	.....	.....	.....	.....	.....
1905.....	37,058,000	1,279,992	1,241,620	38,372	3,963	10.7	3.1	3.2	1,799	4.8	1.4	1.4	2,174	5.9	1.7	1.8
1906.....	37,628,000	1,308,912	1,269,611	39,301	3,722	9.9	2.8	2.9	1,456	3.9	1.1	1.1	2,266	6.0	1.7	1.8
1907.....	38,203,000	1,298,291	1,259,636	38,655	3,771	9.9	2.9	3.0	1,529	4.0	1.2	1.2	2,242	5.9	1.7	1.8
1908.....	38,777,000	1,308,283	1,269,399	38,884	3,899	10.1	3.0	3.1	1,744	4.5	1.3	1.4	2,155	5.6	1.6	1.7
1909.....	39,352,000	1,287,030	1,249,040	37,990	3,913	9.9	3.0	3.1	1,772	4.4	1.4	1.4	2,141	5.4	1.7	1.7
1910.....	39,926,000	1,256,613	1,219,447	37,166	3,897	9.8	3.1	3.2	1,773	4.4	1.4	1.5	2,125	5.3	1.7	1.7
Scotland:																
1901.....	4,479,000	132,192	132,192	627	627	14.0	.....	4.7	280	6.3	.....	2.1	347	7.7	.....	2.6
1902.....	4,507,000	132,267	132,267	682	682	15.1	.....	5.2	307	6.8	.....	2.3	375	8.3	.....	2.8
1903.....	4,535,000	133,625	133,625	709	709	15.6	.....	5.3	291	6.4	.....	2.2	418	9.2	.....	3.1
1904.....	4,564,000	132,003	132,003	615	615	13.5	.....	4.6	241	5.3	.....	1.8	374	8.2	.....	2.8
1905.....	4,592,000	131,410	131,410	718	718	15.6	.....	5.5	248	5.4	.....	1.9	470	10.2	.....	3.6
1906.....	4,621,000	132,005	132,005	717	717	15.5	.....	5.4	263	5.7	.....	2.0	464	9.8	.....	3.4
1907.....	4,650,000	128,840	128,840	686	686	14.8	.....	5.3	228	4.9	.....	1.8	463	9.8	.....	3.6



# MATERNAL MORTALITY.

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1906.....	4, 679, 000	131, 362	676	14.4	5.1	231	4.9	1.8	445	9.5	3.4
1909.....	4, 708, 000	128, 669	699	14.8	5.4	212	4.5	1.6	487	10.3	3.8
1910.....	4, 737, 000	124, 059	710	15.0	5.7	221	4.7	1.8	499	10.3	3.9
1911.....	4, 741, 000	121, 850	699	14.7	5.7	173	3.6	1.4	528	11.1	4.3
1912.....	4, 741, 000	122, 700	675	14.2	5.5	193	4.1	1.6	492	10.2	3.9
1913.....	4, 778, 000	120, 615	708	15.0	5.9	160	3.4	1.3	548	11.6	4.5
1914.....	4, 747, 000	123, 984	746	15.7	6.0	229	4.8	1.8	517	10.9	4.2
Spain:											
1901.....	18, 657, 000	666, 252	15, 035	19.7	5.5	2, 178	11.7	3.3	1, 466	8.0	2.3
1902.....	18, 753, 000	683, 153	16, 466	18.6	5.1	2, 116	11.3	3.1	1, 378	7.3	2.0
1903.....	18, 925, 000	703, 568	18, 325	20.0	5.4	2, 362	12.5	3.4	1, 499	7.5	2.1
1904.....	19, 081, 000	697, 878	17, 247	20.5	5.8	2, 465	13.0	3.7	1, 420	7.5	2.1
1905.....	19, 049, 000	688, 058	17, 407	21.6	6.0	2, 715	14.3	3.9	1, 400	7.3	2.0
1906.....	19, 147, 000	666, 874	16, 489	20.2	5.8	2, 469	12.9	3.7	1, 391	7.3	2.1
1907.....	19, 245, 000	646, 374	15, 907	20.4	5.9	2, 549	13.2	3.9	1, 381	7.2	2.1
1908.....	19, 343, 000	674, 125	16, 424	19.3	5.7	2, 316	12.0	3.4	1, 409	7.3	2.1
1909.....	19, 440, 000	666, 415	16, 643	18.7	5.5	2, 280	11.7	3.4	1, 363	7.0	2.1
1910.....	19, 542, 000	662, 934	16, 147	17.4	5.1	2, 107	10.8	3.2	1, 300	6.7	2.0
Sweden:											
1900.....	5, 117, 000	141, 717	138, 139	3.78	2.3	121	2.4	.9	163	3.2	1.2
1901.....	5, 156, 000	142, 968	136, 370	3.68	2.2	152	2.9	1.1	160	3.1	1.2
1902.....	5, 187, 000	140, 879	137, 364	3.515	2.2	146	2.8	1.0	177	3.4	1.3
1903.....	5, 210, 000	137, 334	133, 896	3.438	2.2	128	2.5	.9	177	3.4	1.3
1904.....	5, 241, 000	138, 484	134, 952	3.532	2.1	126	2.4	.9	162	3.1	1.2
1905.....	5, 278, 000	138, 827	135, 409	3.418	2.5	169	3.2	1.2	174	3.1	1.2
1906.....	5, 316, 000	140, 069	136, 620	3.449	2.3	124	2.3	.9	201	3.8	1.4
1907.....	5, 357, 000	140, 330	136, 763	3.537	2.3	110	2.1	.8	208	3.9	1.5
1908.....	5, 404, 000	142, 309	138, 874	3.435	2.1	107	2.0	.8	188	3.5	1.4
1909.....	5, 483, 000	142, 987	136, 505	3.462	2.4	113	2.1	.8	236	4.3	1.7
1910.....	5, 499, 000	138, 976	135, 625	3.351	2.5	119	2.2	.9	226	4.1	1.7
1911.....	5, 562, 000	136, 355	132, 977	3.358	2.6	136	2.4	1.0	218	3.9	1.6
Switzerland:											
1900.....	3, 302, 000	97, 665	94, 316	5.23	5.5	193	5.8	2.0	330	10.0	3.4
1901.....	3, 341, 000	97, 028	93, 607	5.86	5.8	250	7.5	2.5	336	10.1	3.3
1902.....	3, 385, 000	99, 963	96, 481	5.512	5.0	196	5.8	2.0	304	9.0	3.0
1903.....	3, 429, 000	97, 119	93, 824	5.54	5.7	237	6.9	2.4	317	9.2	3.4
1904.....	3, 472, 000	98, 300	94, 867	5.433	6.0	257	7.4	2.6	333	9.6	3.4
1905.....	3, 516, 000	98, 057	94, 633	5.51	5.6	253	7.2	2.6	298	8.5	3.0
1906.....	3, 560, 000	98, 971	95, 595	5.376	5.0	191	5.4	1.0	304	8.5	3.1
1907.....	3, 604, 000	97, 696	94, 508	5.53	5.7	267	7.2	2.7	282	8.1	3.0
1908.....	3, 647, 000	99, 468	96, 245	5.52	5.6	221	6.2	2.3	327	9.0	3.3
1909.....	3, 691, 000	97, 296	94, 112	5.44	5.6	238	6.4	2.4	306	8.3	3.3
1910.....	3, 735, 000	96, 669	93, 514	4.47	4.6	182	4.9	1.9	265	7.1	2.8
1911.....	3, 781, 000	94, 185	90, 133	5.01	5.3	245	6.5	2.6	256	6.8	2.7
1912.....	3, 831, 000	95, 171	92, 196	4.94	5.1	218	5.7	2.3	266	6.9	2.9

# WATERBURY MORTALITY.

Comparative table of the mortality rates for 1900 and 1901, and the percentage of live births from illegitimate births, in the various foreign countries for specified periods.

Mortality rates, deaths per 1,000 live births, by pregnancy and confinement.					
Country.	Period.	Pregnancy and confinement.		All other.	
		Per 100,000 population.	Per 1,000 live births.	Per 100,000 population.	Per 1,000 live births.
Austria	1900	2.2	3.4	2.2	3.4
	1901	2.4	3.6	2.4	3.6
Belgium	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Denmark	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
France	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Germany	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Italy	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Netherlands	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Sweden	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
Switzerland	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
United Kingdom	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6
United States	1900	2.4	3.6	2.4	3.6
	1901	2.4	3.6	2.4	3.6

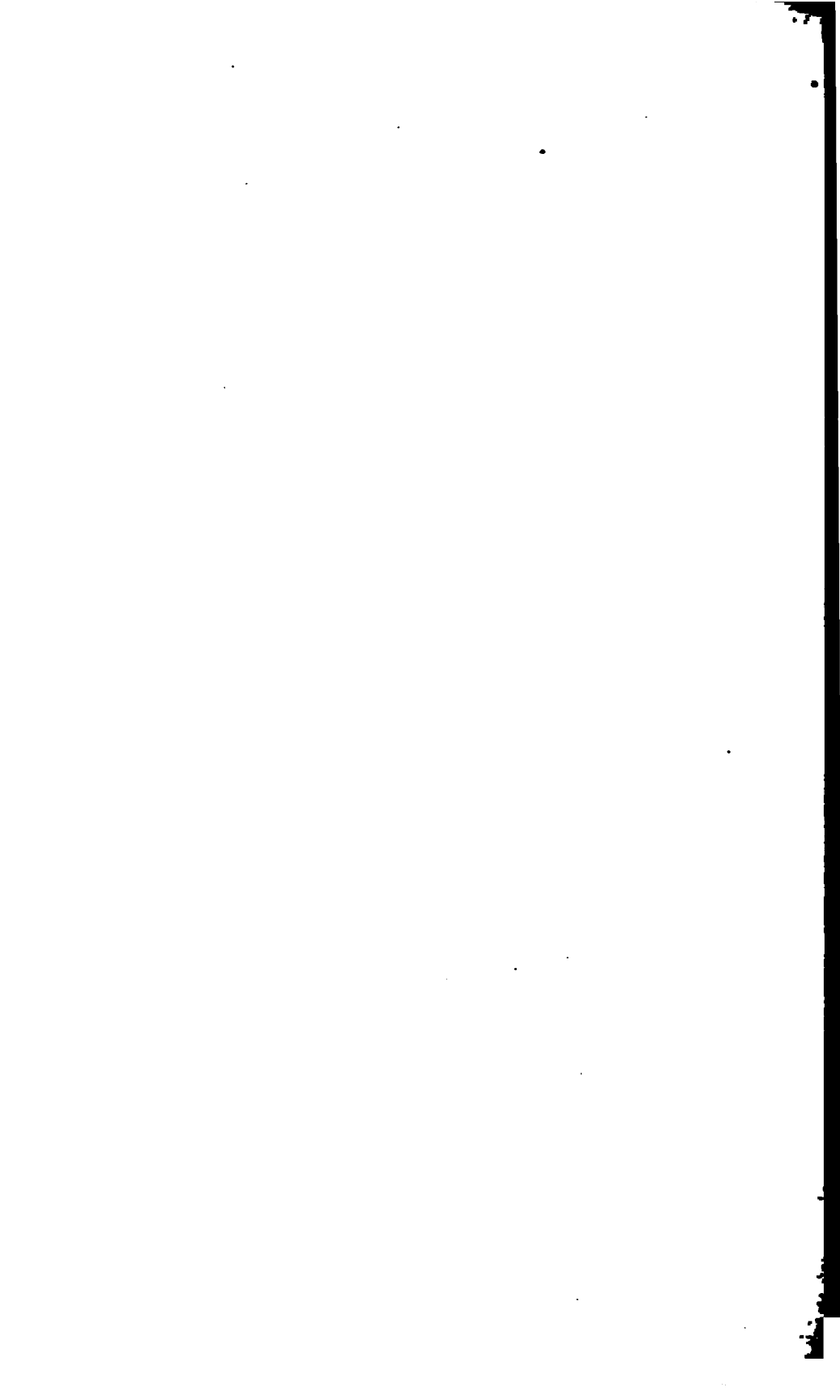


TABLE XVI.—Average death rates per 100,000 population and per 1,000 live births from diseases caused by pregnancy and confinement in certain foreign countries for specified periods of years.

Country and specified period of years.	Death rate from diseases caused by pregnancy and confinement.					
	Total.		Puerperal septicemia.		All other.	
	Per 100,000 population.	Per 1,000 live births.	Per 100,000 population.	Per 1,000 live births.	Per 100,000 population.	Per 1,000 live births.
Australia:						
Whole period.....	14.0	5.2	4.8	1.8	9.2	3.4
1907-1909.....	14.3	5.3	4.6	1.7	9.6	3.6
1910-1912.....	13.7	5.0	4.9	1.8	8.8	3.2
Austria:						
Whole period.....			6.5	1.9		
1900-1903.....			7.2	2.0		
1904-1907.....			6.2	1.8		
1908-1911.....			6.2	1.9		
Belgium:						
Whole period.....	14.7	5.9	5.8	2.3	8.8	3.5
1903-1907.....	15.3	5.8	5.8	2.2	9.5	3.6
1908-1912.....	14.1	6.0	5.9	2.5	8.3	3.6
England and Wales:						
Whole period.....	10.6	4.0	4.3	1.6	6.3	2.4
1900-1904.....	12.5	4.4	5.5	1.9	7.0	2.5
1905-1909.....	10.3	3.9	4.2	1.6	6.2	2.3
1910-1914 <sup>1</sup> .....	9.1	3.7	3.4	1.4	5.6	2.3
France:						
Whole period.....	10.3	5.2	4.8	2.4	5.5	2.4
1906-1910.....	10.3	5.2	4.8	2.4	5.5	2.6
Hungary:						
Whole period.....	13.2	3.6	3.6	1.0	9.6	2.6
1900-1903.....	13.7	3.6	3.2	.8	10.4	2.7
1904-1907.....	13.0	3.5	3.3	.9	9.7	2.6
1908-1911.....	12.9	3.6	4.2	1.2	8.7	2.4
Ireland:						
Whole period.....	12.6	5.4	4.4	1.9	8.2	3.6
1902-1906.....	13.5	5.8	4.9	2.1	8.6	3.7
1907-1910.....	12.2	5.2	4.1	1.8	8.1	3.5
1911-1914.....	11.9	5.2	4.0	1.7	7.9	3.5
Italy:						
Whole period.....	8.7	2.7	3.1	1.0	5.5	1.7
1900-1904.....	8.8	2.7	3.2	1.0	5.6	1.7
1905-1909.....	9.2	2.8	3.4	1.0	5.9	1.8
1910-1913.....	7.9	2.4	2.8	.9	5.1	1.6
Japan:						
Whole period.....	13.0	4.0	4.5	1.4	8.5	2.6
1901-1904.....	13.5	4.2	4.2	1.3	9.3	2.9
1905-1908.....	13.5	4.3	4.5	1.4	9.1	2.9
1909-1912.....	12.0	3.6	4.9	1.5	7.1	2.1
New Zealand:						
Whole period.....	11.7	4.4	3.0	1.1	8.8	3.3
1900-1904.....	12.7	4.8	2.9	1.1	9.8	3.7
1905-1909.....	12.3	4.5	3.2	1.2	9.1	3.3
1910-1914.....	10.5	4.0	2.8	1.1	7.6	3.0
Norway:						
Whole period.....	8.1	2.9	4.1	1.5	3.9	1.4
1900-1903.....	9.1	3.1	4.8	1.7	4.3	1.4
1904-1907.....	7.4	2.7	3.8	1.4	3.6	1.3
1908-1910.....	7.6	2.9	3.7	1.4	4.0	1.5
Prussia:						
Whole period.....	10.4	3.2	4.7	1.4	5.8	1.8
1903-1906.....	11.0	3.2	5.0	1.5	6.0	1.8
1907-1910.....	9.9	3.1	4.4	1.4	5.5	1.7
Scotland:						
Whole period.....	14.9	5.4	5.0	1.8	9.8	3.6
1901-1905.....	14.8	5.1	6.0	2.1	8.7	3.0
1906-1910.....	14.9	5.4	4.9	1.8	10.0	3.6
1911-1914.....	14.9	5.8	4.0	1.5	10.9	4.2
Spain:						
Whole period.....	19.6	5.7	12.3	3.6	7.3	2.1
1901-1905.....	20.1	5.7	12.6	3.6	7.5	2.1
1906-1910.....	19.2	5.7	12.1	3.6	7.1	2.1
Sweden:						
Whole period.....	6.0	2.4	2.4	1.0	3.6	1.4
1901-1904.....	5.8	2.2	2.7	1.0	3.2	1.2
1905-1908.....	6.0	2.3	2.4	.9	3.6	1.4
1909-1911.....	6.3	2.6	2.2	.9	4.1	1.7
Switzerland:						
Whole period.....	14.9	5.6	6.4	2.4	8.5	3.2
1900-1904.....	16.3	5.8	6.7	2.4	9.6	3.4
1905-1908.....	15.0	5.7	6.5	2.4	8.5	3.2
1909-1912.....	13.1	5.3	5.9	2.4	7.3	2.9

<sup>1</sup> See explanatory note on p. 58.





U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU

JULIA C. LATHROP, CHM

# INFANT MORTALITY

RESULTS OF A FIELD STUDY IN MANCHESTER, N. H.  
BASED ON BIRTHS IN ONE YEAR

By

BEATRICE SHEETS DUNCAN and EMMA DUKE

63

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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,  
*Washington, November 4, 1916.*

SIR: I transmit herewith a study of infant mortality in the city of Manchester, N. H., for one year, being the third item in the field inquiry begun by the study of infant mortality in Johnstown, Pa.

Manchester was selected because of its high infant mortality rate, according to the United States census figures (1910), because it is within the birth-registration area, and because certain of its industrial characteristics are in marked contrast with those of Johnstown.

The field work was directed and the preparation of the statistical material was supervised by Miss Emma Duke, now in charge of the bureau's statistical division. The text was prepared principally by Mrs. Beatrice Sheets Duncan, who, however, resigned from the bureau before the completion of the report. The final revision was made by Miss Duke and Mr. Howard C. Jenness. A supplementary field study of father's earnings was in charge of Miss Marie Kasten.

An unusually large number of field agents and statistical clerks shared in the work of this report because it was made during a transition period—while the civil-service examinations for the enlarged staff were pending—and it was necessary to secure a considerable number of temporary assistants. I regret that it is therefore impracticable to mention all those in the office and in the field who have assisted in this study.

Respectfully submitted.

JULIA C. LATHROP, *Chief.*

Hon. WILLIAM B. WILSON,  
*Secretary of Labor.*





# INFANT MORTALITY, MANCHESTER, N. H.

## INTRODUCTION.

Manchester, N. H., was the second city selected by the Children's Bureau for a field inquiry into infant mortality in its series of community studies upon this subject. The first study was made in Johnstown, Pa., a steel-mill city containing a large foreign population. A second report upon infant mortality, however, has been published by the bureau, namely, that for Montclair, N. J., a suburban residence community, where the investigation itself was conducted by the city authorities and the results presented by them to the Children's Bureau for analysis.

Manchester was chosen for several reasons: It had an unusually high infant mortality rate, it was within the registration area for births and deaths so that records for those were available, and it presented conditions which usually are associated with high infant mortality—namely, a large foreign population and a considerable proportion of industrially employed women.

Because of incomplete registration of births and deaths infant mortality rates are not available for all cities in the United States, but only for those cities in which such registration is considered to be 90 per cent complete. Of such cities, according to the table, only two, Holyoke and Lowell, have higher infant mortality rates than Manchester, and the high rate in Holyoke is perhaps due in part to the presence there of a large infant asylum which receives infants born in other cities.

For the registration States,<sup>1</sup> which in 1910 comprised 58.3 per cent of the population and 33.6 per cent of the land area of the United States, the infant mortality rate for 1910 was 124, as computed by the Bureau of the Census. In other words, for every eight births there was one infant death.

Behind a general rate, however, are variations not only among different communities but, more markedly, among different groups within the same community; and to trace, if possible, these variations between and within communities and to learn in detail the conditions under which babies live and die is the purpose of the series of studies to which the present report is a contribution.

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<sup>1</sup> The registration States are those in which the registration of deaths is considered by the Bureau of the Census to be at least 90 per cent complete.

The term infant mortality rate as ordinarily used means the number of deaths of infants (i. e., babies under 1 year of age) per 1,000 live births in the same area during the same year. In Manchester in 1910, according to statistics published by the Federal Bureau of the Census, this rate was 193. How it compares with rates in other cities of at least 50,000 population in 1910 is shown in the following table:<sup>1</sup>

*Infant mortality rates for registration cities having a population of at least 50,000 in 1910.*

City.	Infant mortality rate. <sup>1</sup>	City.	Infant mortality rate. <sup>1</sup>
Connecticut:		New York, N. Y. ....	125
Bridgeport.....	123	Bronx Borough.....	96
Hartford.....	119	Brooklyn Borough.....	117
New Haven.....	108	Manhattan Borough.....	135
Waterbury.....	149	Queens Borough.....	122
Manchester, N. H. ....	193	Richmond Borough.....	138
Massachusetts:		Pennsylvania:	
Boston.....	126	Allentown.....	144
Brockton.....	99	Altoona.....	119
Cambridge.....	119	Erie.....	115
Fall River.....	186	Harrisburg.....	129
Holyoke.....	213	Johnstown.....	165
Lawrence.....	167	Philadelphia.....	138
Lowell.....	231	Pittsburgh.....	150
Lynn.....	97	Reading.....	142
New Bedford.....	177	Scranton.....	143
Somerville.....	101	Wilkes-Barre.....	146
Springfield.....	124	Portland, Me. ....	144
Worcester.....	137	Rhode Island:	
Michigan:		Pawtucket.....	( <sup>2</sup> )
Detroit.....	179	Providence.....	( <sup>2</sup> )
Grand Rapids.....	122	Washington, D. C. ....	152
Saginaw.....	145		

<sup>1</sup> Based on provisional figure for births.

<sup>2</sup> Returns of births not received from State board of health in time for inclusion.

### METHOD AND PLAN OF STUDY.

The infant mortality rates for Manchester and other cities shown in the foregoing table are computed from the births and deaths registered during a given calendar year. Obviously the deaths in part were of babies born during the previous year and the rate can not be used as an exact measure of the deaths of those born during a given year. To avoid this inaccuracy and to obtain a precise rate it would be necessary to follow through their first year of life all babies born during the year and to note the deaths occurring among them within that period. Such a method requires not only perfect birth registration but the means of locating the baby (or its family) 12 months after birth, and therefore for most communities is quite impracticable; but the present study has been limited to those babies to whom this method can be applied. It is, therefore, the one employed.

**Scope.**—The work of investigation was begun in Manchester in the fall of 1914, when all the babies born within the selected period might have completed 12 months of life. The study, as stated, was confined to registered babies whose names and addresses were obtained

<sup>1</sup> Derived from table on page 18 of Bulletin 160, Mortality Statistics, 1910, Bureau of the Census, Washington, 1912.

from the birth certificates on file at the city hall. So far as possible all their mothers were interviewed and information secured regarding the care of the baby, the character of the home, the economic status of the family, etc., and the information thus secured was recorded upon the schedules and furnishes the basis for analyzing the factors contributing toward the high infant mortality rate in Manchester. All such information was secured whether the babies lived or died, the purpose being to study the conditions existing the first year after birth, and to note under what circumstances babies survive or fail to survive.

**Cooperation.**—Before the work of interviewing the mothers was begun the nature, and purpose of the investigation was explained fully through the newspapers and by the clergy in order that the interest and cooperation of the public and particularly of the mothers might be secured. From the beginning every courtesy was extended to the agents by the local city officials in giving access to city records and support to the investigation. The mothers were found ready and willing to give the information desired as soon as they understood the reason for it. Evidence of the cordial response which they made to this inquiry is furnished by the fact that in six cases only was the information refused.

**Infants included and excluded.**—The investigation was limited to the live births and stillbirths registered in Manchester between November 1, 1912, and October 31, 1913. These numbered 2,152, but for the reasons noted in the following summary 604 of the births during the selected year were excluded from the study. Of these, 95 were excluded because they were not registered and 470 because the babies could not be found.

Nationality of mother.	Births during selected year.								
	Total.	In-cluded in study.	Excluded from study and reasons for exclusion.						
			Total.	Un-regis-tered <sup>1</sup>	Not found. <sup>2</sup>	Mother dead and data in-complete.	Informa-tion refused.	Miscar-riage. <sup>3</sup>	Illegiti-mate. <sup>4</sup>
All mothers.....	2, 247	1, 643	604	95	470	15	6	7	11
Nativity unknown.....	2	.....	2	2	.....	.....	.....	.....	.....
Native.....	724	648	176	27	132	4	3	3	7
Foreign-born.....	1, 521	1, 095	426	66	338	11	3	4	4
Canadian, French.....	808	610	198	28	160	7	.....	3	.....
Canadian, except French.....	41	27	14	.....	13	1	.....	.....	.....
Polish.....	277	170	107	21	81	2	1	1	1
English, Irish, Scotch.....	144	115	29	6	18	1	2	.....	2
Greek and Syrian.....	113	72	41	9	32	1	.....	.....	.....
German.....	31	30	1	.....	1	.....	.....	.....	.....
Jewish.....	25	24	1	.....	1	.....	.....	.....	.....
Ruthenian and Lithuanian.....	30	22	8	2	5	.....	.....	.....	1
All other and no report.....	52	25	27	.....	27	.....	.....	.....	.....

<sup>1</sup> Including 9 illegitimate births.

<sup>2</sup> Including 24 illegitimate births.

<sup>3</sup> Study confined to issues of pregnancy resulting from 7 or more months' gestation.

<sup>4</sup> Mother visited; results discussed in illegitimacy section on page 108.

In 1,643 instances complete schedules were secured and used as the basis of this study. Of these, 79 were for stillborn infants. Among the 1,564 live-born infants occurred 258 infant deaths, a mortality rate of 165. This rate is not offered as an accurate one for the city nor as one to be used in comparison with the rates for other cities, but rather as a rate accurate for the sample group of babies selected for detailed study.

The precise infant mortality rate for the city as a whole can not be computed, because the exact number of births and of deaths during the 12 months is not known. We know that in addition to the 509 excluded cases of babies whose births were registered, other babies were born in the selected period whose births were not registered. Agents found 95 such babies chiefly through the death certificates, but no attempt was made to find all surviving unregistered births. Hence to compute a rate for unregistered births, learned of principally through death certificates, is obviously unsound; in fact, such a rate would be over 800.

Practically all infant deaths in Manchester were recorded, but the number of the excluded babies who may have died outside the city is unknown; therefore a rate based upon those who were born in Manchester and moved away in their first year would be too low.

By using all available data (that is, not only the births included in the study but also the 509 registered and the 95 unregistered births excluded from the study), incomplete as they are, for computing a rate, we find an infant mortality rate of 188.7. This rate is undoubtedly too high, for, as we have seen, no canvass was made to find all babies whose births were not registered. If all babies had been located and included in the study the true rate for the city would lie in all probability somewhere between the two rates, 165 and 188.7.

TABLE 2.

TABLE 2.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths and miscarriages. <sup>1</sup>	
		Total.	Infant deaths.		Number.	Per cent.
			Number.	Infant mortality rate.		
Total.....	2, 247	2, 114	399	188. 7	133	5. 9
Included in detailed study, registered.....	1, 643	1, 564	258	165. 0	79	4. 8
Excluded from detailed study.....	604	550	141	256. 4	54	8. 9
Registered.....	509	471	77	163. 5	38	7. 5
Unregistered.....	95	79	64	810. 1	16	16. 8

<sup>1</sup> Dead issues of less than 7 months' gestation were not included in the detailed study.

A classification by mother's nationality of registered births that were excluded from tabulation shows the number of such births to foreign-born and to native mothers.

TABLE 3.

Nationality of mother.	Registered births during selected year and infant deaths excluded from detailed study.				
	Total births.	Live births.		Still-births and miscarriages.	
		Total.	Infant deaths.		
			Number.		Infant mortality rate. <sup>1</sup>
All mothers.....	509	471	77	163.5	38
Native.....	149	135	21	155.6	14
Foreign-born.....	360	336	56	166.7	24
Canadian, French.....	170	155	29	187.1	15
Canadian, except French.....	14	13	1	.....	1
Polish.....	86	83	13	.....	3
English, Irish, Scotch.....	23	22	7	.....	1
Greek and Syrian.....	32	30	5	.....	2
German.....	1	1	.....	.....	.....
Jewish.....	1	1	.....	.....	.....
Ruthenian and Lithuanian.....	6	6	.....	.....	.....
All other.....	27	25	1	.....	2

<sup>1</sup> Not shown where base is less than 100.

**Verification of father's earnings.**—Information concerning father's earnings was originally obtained from the mother, but when the schedules had all been completed and turned in to the office a question arose as to whether or not mothers generally are able to give reasonably accurate statements concerning their husbands' earnings. It was decided, therefore, to check or verify the mothers' answers and, accordingly, eight months after the original data were secured, agents were sent to Manchester for this purpose.

Employers gave generous assistance in this work, and the agents of the bureau had free access to the pay rolls. Because of similarity of names, identification was sometimes difficult; and on account of shifts from one job to another in the same establishment, or from one establishment to another, it was not always possible to secure from pay rolls the earnings of a given man for the entire year.

When the pay-roll record was not complete for the entire year, the agents supplemented the information thus secured by interviews with fathers. Sometimes the fathers found it difficult to remember the earnings for a definite year, namely, that which followed the birth of the baby whose history was being studied, particularly when that was two or more years prior to the time of the interview.

In view of these chances of error, each record secured by the verifiers was carefully studied in connection with the original returns, and that which bore evidence of greater accuracy was accepted.

Where the evidence seemed to afford no basis for choice, preference was given the verifiers' returns.

Averaging the results, it was unexpectedly found that on the whole the complete statements secured from pay rolls and in interviews with employers and fathers were lower than those previously obtained from mothers. As a result of the test it was decided that the deviations were unimportant, and confidence in the mothers' statements of earnings was strengthened.

When infant mortality rates were computed according to father's earnings on the bases of the original, the revised, and the accepted figures, there was found to be little difference in trend in the three sets of figures. The following table and the diagram on the next page indicate the amount of this variation:

TABLE 4.  Father's earnings.	Infant mortality rates based upon—		
	Accepted figures.	Original figures.	Revised figures.
Under \$494.....	261.1	241.0	262.4
\$494 to \$571.....	172.2	194.9	145.7
\$572 to \$675.....	186.3	196.2	191.7
\$676 to \$883.....	151.1	158.9	145.7
\$884 to \$1,091.....	143.9	152.5	146.2
\$1,092 and over.....	58.8	94.9	53.2

It will be noticed that the limits of the earnings groups of the diagram differ radically from those of the tables in the body of this report. The limits in the diagram were those originally chosen; the change in this report was the result of a deliberate attempt to secure greater accuracy in results, because a close examination of the individual reports disclosed a marked tendency to concentration of earnings on the even hundreds and on those sums which were multiples of a certain weekly wage. Obviously, of those reporting round numbers, or sums that were multiples of 52, some probably earned more or less than those amounts. Many reported earning a definite weekly wage for the whole year, when in many instances records showed that they had earned less on account of unemployment or more because they had supplemented these earnings by extra work.

The limits of the earnings groups were changed, therefore, so that as far as possible those points of concentration might fall well within the various groups rather than near the upper or lower limit of any group. With the limits of a group fixed at \$550 to \$649, a father reported as earning \$600 who may have earned \$50 more or less would fall still within the proper group; or a father earning \$12 per week who might have suffered six weeks of idleness would be correctly classified so far as the earnings group was concerned.

## EXPLANATION OF TERMS.

Lack of uniformity in the definitions of such terms as infant, birth, live birth, still-birth, miscarriage, etc., makes it essential that the meanings assigned these words in this report be explained.

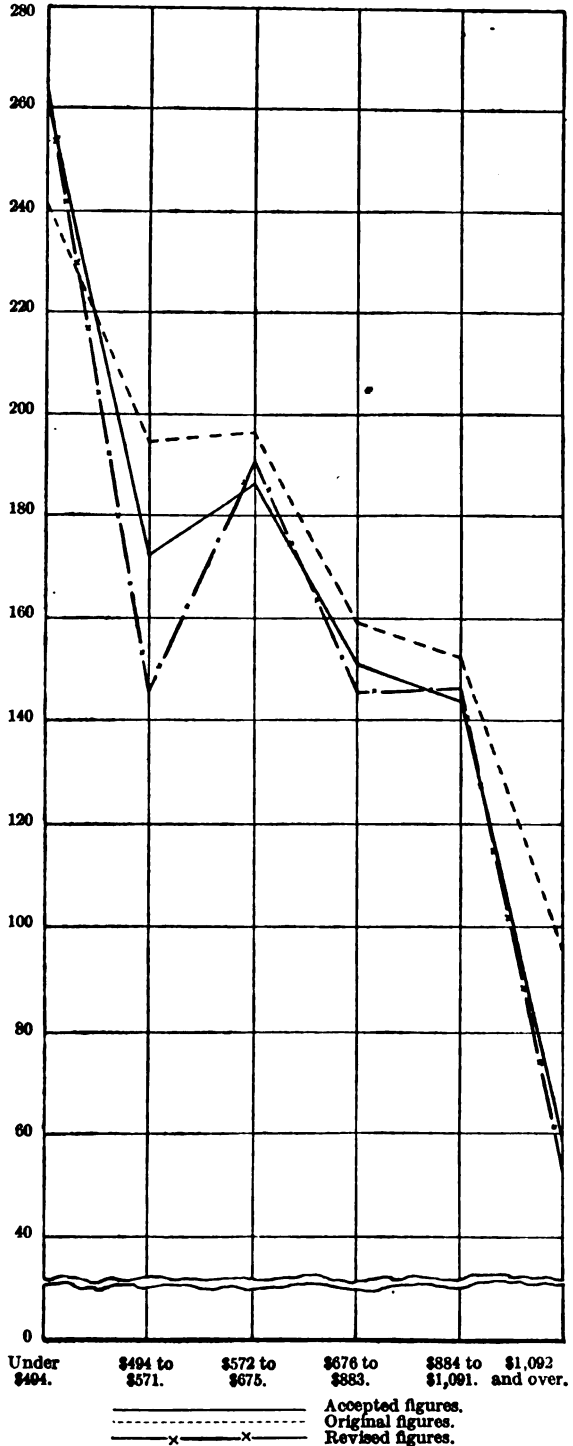
There are no standard definitions for these terms which are uniformly used by medical or legal authorities or vital statisticians and given the same meaning by the general public in various localities. It is generally understood that a child is born dead when it shows no signs of life at birth, but there have been various legal decisions as to what physiological function or functions are to be regarded as signs of life.

In this report the statements of the attending physician on these points as well as upon all medical matters are accepted, and any child recorded as live-born or dead-born by the attending physician has been reported accordingly.

Stillbirth has been applied to all dead-

DIAGRAM I.—INFANT MORTALITY RATES BY FATHER'S EARNINGS, DERIVED FROM ACCEPTED FIGURES, ORIGINAL FIGURES, AND REVISED FIGURES.

RATE.



born issues of pregnancy which resulted from seven or more calendar months' gestation; and the term miscarriage to all dead-born issues which have resulted from less than seven calendar months' gestation.

The following are brief explanations of the meanings assigned to some of the expressions used in the text and tables of this report:

*Selected year.* Year ended October 31, 1913.

*Infant.* Child under 1 year of age.

*Live birth.* Infant reported by attending physician as born alive.

*Stillbirth.* Product of pregnancy expelled after seven or more months' gestation and reported by attending physician as born dead.

*Total births.* Sum of live births and stillbirths. Miscarriages are excluded.

*Miscarriage.* Product of pregnancy expelled during first seven months of pregnancy and reported by attending physician as born dead.

*Infant death.* Death of an infant under 1 year of age.

*Infant mortality rate.* The number of infant deaths per 1,000 live births during selected year.

*All pregnancies.* Miscarriages are excluded unless the contrary is indicated by a note.

*Maternal records.* Statistics on maternal records are based upon complete pregnancy records furnished by married mothers. Whenever the mother had borne children before her marriage, or whenever she had not been able to state positively the age at death of her various children, or the information was in any way incomplete, her record was not included.

*Ward of residence.* The ward in which live-born infants spent the greater part of their life and in which stillborn infants' mothers spent the greater part of their pregnancy. This was not necessarily the ward in which the birth or death occurred.

*Housing.* Information as to congestion, house defects, rent, etc., was secured for the house in which the baby spent the greater part of the first year of its life.

*Earnings and income.* Reports were secured of the earnings and income of the family only for the year following the birth of the infant even in the case of stillborn children, and hence earnings invariably relate to that year.

*Occupation of father.* The occupation reported for the father is the principal one in which he was engaged in the year following the birth of the infant during the selected year.

*Occupation of mother.* Occupation of mother was ascertained for the year preceding and the year following the birth of the infant during the selected year.



**GENERAL INDUSTRIAL CONDITIONS.**

**Industries.**—The dominant industry of Manchester is the manufacture of textiles, particularly cotton. This industry at present employs more than three times as many people as any other and has played an important part in the city's growth and development from its very early history. As far back as 1809 cotton manufacture was started here in what was then the little village of Derryfield. The Amoskeag Falls at this point of the Merrimack River furnish the abundant water power which has been largely responsible for the development of Manchester into a textile city. In 1794 the potential value of the falls was recognized by Judge Samuel Blodgett, who undertook the project of building a dam and a canal. He predicted that the village of Derryfield some day would become "the Manchester of America,"<sup>1</sup> and in 1810 in honor of his memory the name was changed to Manchester.

The development of the cotton textile industry was slow until 1825, when the enterprise begun in 1809 was taken over by a new company, under whose management the business prospered. Since that period the growth of the industry has been steady. In 1831 a final incorporation under a new management took place, and the company formed then has continued up to the present time.

According to the Federal census of 1910 the total number of persons 10 years of age and over gainfully employed in Manchester was 35,000, of whom 22,743 were male and 12,257 female. There were 25,131 persons engaged in manufacturing and mechanical industries, and of these 9,126 were females.

At present two establishments in Manchester are engaged in cotton manufacture. One of these produces the coarser cotton goods—ducks, sheeting, etc. The other, in addition to the heavy and coarser products, manufactures cotton dress goods, such as gingham and prints, as well as some worsted goods. These two establishments are reported by the employers as having approximately 18,800 employees, of whom 15,500 are in one establishment. The number of women employed in the manufacture of textiles is about 8,600.

The manufacture of shoes is next in importance to that of textiles. The six largest establishments employ over 6,000 persons, many of whom are women. Women also work to a considerable extent in the manufacture of cigars.

**Conditions of employment.**—The conditions of employment vary in the different industries. The hours of labor prescribed for women regulate to some extent those of men in industries where both are employed, and Saturday afternoon half holiday is the custom in most of the factory occupations. The cotton operatives are relatively

<sup>1</sup> Manchester, a Brief Record of Its Past and a Picture of Its Present, p. 21. Maurice D. Clarke, compiler, Manchester, N. H., 1875.

unskilled and receive lower rates of wages than employees in the shoe and cigar factories. The industry offers steady employment, however, practically throughout the year, with the exception of two weeks' shutdown in the fall, and consequently the labor force contains a stable element of regular workers who have been employed for a period of years. One company encourages stability by engaging in extensive welfare work and by offering its employees assistance in building homes.

The cotton operatives are of many nationalities—French-Canadian, English, Scotch, Irish, Polish, Greek, and Syrian. The last three named are the latest arrivals and as a rule are found in the least-skilled and lowest-paid occupations. The French Canadians predominate in number.

Employment in the shoe industry has been much less regular than that in the mills. This condition, however, as well as the rate of pay, varies somewhat with the different establishments.<sup>1</sup>

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<sup>1</sup> Following are the more important provisions of the laws regulating the employment of women and children in force in 1914: Working hours for women and minors in manufacturing, mechanical, and mercantile establishments, laundries, restaurants, and confectionery stores, or in the employ of express or transportation companies, shall not exceed 10½ in any one day nor 55 in any one week. In the same establishments girls and women employed at night—that is, if any part of their employment on more than one day a week is between 8 p. m. and 6 a. m. of the following day—may not work more than 8 hours in any 24, nor more than 48 hours in any one week. [Acts of 1913, ch. 156. Ch. 164 of the acts of 1915 amends this act by providing for certain exemptions and by making the maximum of 10½ hours a day and 55 a week apply to any female or "minor under 18 years of age" instead of to any female or "minor."] Children under 14 are not allowed to work in a comprehensive list of employments, including work in factories and mercantile establishments, and may not work under 16 in those employments unless they have fulfilled certain educational requirements. [Acts of 1911, ch. 162, as amended by acts of 1913, ch. 224. Ch. 61 of the acts of 1915 amends this act, but makes no important change except that it permits employment during school vacation without the fulfillment of the educational requirements.]

## PART I. ANALYSIS OF FINDINGS.

### INFANT MORTALITY RATE.

In the detailed study of infant life and mortality in Manchester the group was composed, as we have seen, of 1,643 registered infants born during the 12-month period ended October 31, 1913. Of these, 79, or 4.8 per cent, were stillborn, and of the 1,564 live born, 258 died under 1 year of age, making an infant mortality rate of 165.

### AGE AT DEATH.

The largest proportion of deaths occurred in the early period of infancy, which always makes the greatest inroads upon infant life, and especially is this true of the first few days. In the first week 46 deaths occurred, constituting 17.8 per cent of all deaths. If the same number had occurred in each succeeding week, all the babies would have been dead before the end of eight months. On the first day the percentage of deaths was higher than on any other day, and although it continued high for a number of weeks it declined progressively from the day of birth to the end of the year.

TABLE 5.

Deaths among infants born during selected year to—

Age at death.	All mothers.		Native mothers.		Foreign-born mothers.					
	Num-ber.	Per cent distrib-ution.	Num-ber.	Per cent distrib-ution.	Num-ber.	Per cent distrib-ution.	French-Canadian mothers.		Other for-eign-born mothers.	
							Num-ber.	Per cent distrib-ution.	Num-ber.	Per cent distrib-ution.
All ages.....	258	100.0	67	100.0	191	100.0	129	100.0	62	100.0
Under 1 month.....	72	27.9	16	23.9	56	29.3	38	29.5	18	29.0
Less than 1 day.....	17	6.6	4	6.0	13	6.8	11	8.5	2	3.2
1 day but less than 2.....	6	2.3	2	3.0	4	2.1	2	1.6	2	3.2
2 days but less than 3.....	8	3.1	.....	.....	8	4.2	7	5.4	1	1.6
3 days but less than 7.....	15	5.8	2	3.0	13	6.8	8	6.2	5	8.1
1 week but less than 2.....	10	3.9	5	7.5	5	2.6	2	1.6	3	4.8
2 weeks but less than 1 month.....	16	6.2	3	4.5	13	6.8	8	6.2	5	8.1
1 month but less than 2.....	24	9.3	4	6.0	20	10.5	15	11.6	5	8.1
2 months but less than 3.....	24	9.3	4	6.0	20	10.5	10	7.8	10	16.1
3 months but less than 6.....	57	22.1	22	32.8	35	18.3	26	20.2	9	14.5
6 months but less than 9.....	49	19.0	14	20.9	35	18.3	27	20.9	8	12.9
9 months but less than 12.....	32	12.4	7	10.4	25	13.1	13	10.1	12	19.4

Deaths on the first day were 6.6 per cent of deaths under 1 year; those of the first week 17.8 per cent; of the first month 27.9 per cent. In the first three months of life there were 120 deaths, or 46.5 per cent of all infant deaths. Over twice as many babies died in the first half as in the last half of their first year, and in the last half more died in the third quarter than in the fourth.

This concentration of deaths in the early part of the first year of life is common to infant mortality elsewhere. For the registration area of the United States in 1913 the excess of deaths during the first weeks is even more marked. In this area deaths under 1 day of age formed 13.4 per cent of all infant deaths as compared with 6.6 per cent in Manchester, while deaths under 1 week were 28.4 per cent, under 1 month 43.3 per cent, and under 3 months 60.3 per cent as compared with 17.8, 27.9, and 46.5 per cent, respectively, in Manchester.

Age at death.	Per cent distribution.	
	Man- chester.	Registra- tion area. <sup>1</sup>
All ages .....	100.0	100.0
Under 1 month.....	27.9	43.3
Less than 1 day.....	6.6	13.4
1 day but less than 2.....	2.3	4.9
2 days but less than 3.....	3.1	3.4
3 days but less than 7.....	5.8	6.8
1 week but less than 2.....	3.9	6.4
2 weeks but less than 1 month.....	6.2	8.4
1 month but less than 2.....	9.3	9.4
2 months but less than 3.....	9.3	7.7
3 months but less than 6.....	22.1	17.4
6 months but less than 9.....	19.0	12.5
9 months but less than 12.....	12.4	9.9

<sup>1</sup> Derived from Table 8, p. 577, Mortality Statistics, 1913, Bureau of the Census, Washington, 1915.

One fact which would lead one to expect a high death rate during the first weeks and months after birth is that the hazard to life in general is greatest then; babies are weakest at birth and during early infancy. Again, a large number of deaths during these early days of infant life are due to prenatal causes, such as premature birth, congenital defects, and weakness at birth.

As one means of reducing the number of early deaths, proper prenatal care of mothers is of the utmost importance. Efforts toward this end have been made in a number of communities by hospitals, visiting nurses, health officials, and others who have attempted to make accessible to all mothers adequate medical advice and obstetrical care during pregnancy and childbirth.

The number of infant deaths during the early months does not indicate that in Manchester the whole problem of prevention of infant mortality lies among the younger babies. The death rate, though on the decline as the babies grew older, nevertheless continued sufficiently high to the end of the 12-month period to be susceptible of considerable reduction. In the group under consideration 32 deaths occurred during the last quarter of the first year of life, and even this number per quarter would have given an infant mortality rate of 81.8. Such a rate, based upon the assumption that the deaths were evenly distributed throughout the first year, would be unduly high considering that some communities have reduced their actual rate to or below that point. (See Table 7.)

The number of deaths in each month of age is shown graphically in the following diagram. From 72 in the first month the number of deaths drops sharply to 24 in the second month, and thereafter there is a general tendency for the number to decrease each month except the ninth, in which occurs a marked increase.

DIAGRAM II.—INFANT DEATHS OCCURRING IN SPECIFIED MONTH OF AGE.

NUMBER.

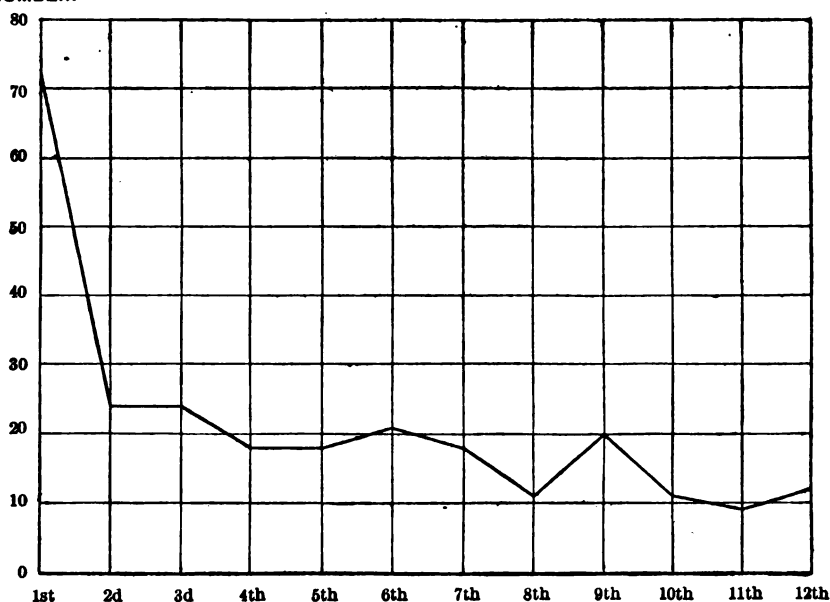


TABLE 7.

Cause of death.	Deaths among infants born during selected year.														
	Total deaths.	Occurring in specified month of age.													
		First.			Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.	Eleventh.	Twelfth.
		Total.	Under 2 weeks.	2 weeks but under 1 month.											
All causes .....	258	72	56	16	24	24	18	18	21	18	11	20	11	9	12
Gastric and intestinal diseases .....	99	10	4	6	9	10	11	11	10	8	7	11	6	2	4
Respiratory diseases .....	41	4	2	2	6	5	2	.....	3	5	3	2	3	3	5
Malformations .....	14	10	8	2	.....	3	.....	.....	.....	.....	.....	1	.....	.....	.....
Early infancy .....	62	38	34	4	5	2	4	4	4	2	1	1	.....	.....	1
Premature birth .....	23	23	23	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Congenital debility .....	38	14	10	4	5	2	4	4	4	2	1	1	.....	.....	1
Injuries at birth .....	1	1	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Epidemic diseases .....	5	1	.....	1	.....	.....	1	.....	.....	1	.....	1	.....	.....	1
Diseases ill defined or unknown .....	11	3	2	1	1	2	.....	1	1	1	.....	1	.....	.....	1
All other causes .....	26	6	6	.....	3	2	.....	2	3	1	.....	3	2	4	.....

## MEDICAL CAUSE OF DEATH.

Infant deaths are classified by the medical cause of death, which is the immediate cause only. Back of it lie, frequently, economic and social causes. Such conditions as poverty, ignorance in the care of the baby, the work of the mother, and artificial feeding may all share in the responsibility for death.

**Gastric and intestinal diseases.**—The diseases of infancy most commonly fatal in Manchester were the principal diseases of the digestive tract or gastric and intestinal diseases; they were responsible for 99 deaths, or 38.4 per cent of the entire number.

The proportion of deaths from gastric and intestinal diseases in Manchester as compared with that in the registration area in 1913 is of significance in connection with the city's high infant death rate. Deaths from this class of diseases are commonly believed to be in a large degree preventable,<sup>1</sup> and hence attempts to reduce infant mortality frequently have been confined largely to efforts to reduce the number of deaths from these diseases. The methods commonly employed have been the improvement of the milk supply, the establishment of infant-welfare stations and of agencies which distribute pure and modified milk to mothers of young babies and give instruction to

<sup>1</sup> Prof. Irving Fisher, in his Report on National Vitality, prepared for the National Conservation Committee, p. 11, says: "Using the statistics, experience, and estimate of 18 physicians as to the preventability of each of the list of 90 causes of death, we find that the length of life could easily be increased from 45 to 60 \* \* \*. The principal reduction would be from infantile diarrhea and enteritis, over 80 per cent of which could be prevented."

them, and furnish other means of disseminating information in regard to the proper care and feeding of babies. In Manchester there were three infant-welfare stations maintained by private philanthropy during the summer months.

TABLE 8.		Cause of death. <sup>a</sup>	Infant deaths in—			
Abridged International List number. <sup>1</sup>	Detailed International List number. <sup>1</sup>		Manchester.		Registration area, 1913.	
			Number.	Per cent distribution.	Number.	Per cent distribution.
		All causes.....	258	100.0	159,435	100.0
		Gastric and intestinal diseases <sup>2</sup> .....	99	38.4	41,379	26.0
		Diseases of the stomach.....	3	1.2	2,924	1.8
		Diarrhea and enteritis.....	96	37.2	38,455	24.1
		Respiratory diseases <sup>3</sup> .....	41	15.9	24,285	15.2
		Acute bronchitis.....	13	5.0	3,665	2.3
		Broncho-pneumonia.....	17	6.6	13,100	8.2
		Pneumonia.....	11	4.3	7,520	4.7
		Malformations.....	14	5.4	8,813	5.5
		Early infancy.....	62	24.0	52,865	33.2
		Premature birth.....	23	8.9	27,359	17.2
		Congenital debility.....	38	14.7	20,375	12.8
		Injuries at birth.....	1	.4	5,131	3.2
		Epidemic diseases <sup>4</sup> .....	5	1.9	13,390	8.4
		Measles.....	1	.4	2,011	1.3
		Scarlet fever.....			255	.2
		Whooping cough.....	4	1.6	3,442	2.2
		Diphtheria and croup.....			913	.6
		Influenza.....			608	.4
		Dysentery.....			651	.4
		Erysipelas.....			756	.5
		Tetanus.....			369	.2
		Tuberculosis of the lungs.....			848	.5
		Tuberculous meningitis.....			1,230	.8
		Other forms of tuberculosis.....			413	.3
		Syphilis.....			1,864	1.2
		External causes.....			1,862	1.2
		Diseases ill defined or unknown.....	11	4.3	3,222	2.1
		All other causes.....	26	10.1	13,519	8.5
		Meningitis.....	11	4.3	1,739	1.1
		Convulsions.....	7	2.7	3,125	2.0
		Organic diseases of the heart.....	1	.4	748	.5
		Other.....	7	2.7	7,907	5.0

<sup>1</sup> The numbers indicate the classification in the abridged and the detailed lists, respectively, of the Manual of the International List of Causes of Death.

<sup>2</sup> The causes of death included in this list are those used by the U. S. Bureau of the Census (see Mortality Statistics, 1913, p. 577) in classifying the deaths of infants under 1 year. They are those causes of death or groups of causes which are most important at this age. The numbers of the detailed and abridged International Lists will facilitate their identification. In order to make discussion of the figures easier, these causes of death have been grouped in 8 main groups.

<sup>3</sup> The term "gastric and intestinal diseases," as used in the tables and discussion, includes, as above shown, only the diseases of this type which are most important among infants; i. e., diseases of the stomach, diarrhea, and enteritis. It does not include all "diseases of the digestive system" as classified under this heading according to the detailed International List.

<sup>4</sup> The term "respiratory diseases," as used in the tables and discussion, similarly includes only those of the respiratory diseases which are most important among infants; i. e., acute bronchitis, broncho-pneumonia, and pneumonia. It does not include all "diseases of the respiratory system" as classified under this heading according to the detailed International List.

<sup>5</sup> The term "epidemic diseases," as used in the tables and discussion, includes only those of this group which are most important among infants.

TABLE 9.

Cause of death.	Deaths among infants born during selected year to—					
	All mothers.			Native mothers.		
	Number.	Infant mortality rate.	Per cent distribution.	Number.	Infant mortality rate.	Per cent distribution.
All causes.....	258	165.0	100.0	67	128.1	100.0
Gastric and intestinal diseases.....	99	63.3	38.4	29	55.4	43.3
Respiratory diseases.....	41	26.2	15.9	12	22.9	17.9
Malformations.....	14	9.0	5.4	1	1.9	1.5
Early infancy.....	62	39.6	24.0	19	36.3	28.4
Premature birth.....	23	14.7	8.9	7	13.4	10.4
Congenital debility.....	38	24.3	14.7	12	22.9	17.9
Injuries at birth.....	1	.6	.4			
Epidemic diseases.....	5	3.2	1.9	1	1.9	1.5
Diseases ill defined or unknown.....	11	7.0	4.3			
All other causes.....	26	16.6	10.1	5	9.6	7.5

Cause of death.	Deaths among infants born during selected year to foreign-born mothers.								
				French-Canadian mothers.			Other foreign-born mothers.		
	Number.	Infant mortality rate.	Per cent distribution.	Number.	Infant mortality rate.	Per cent distribution.	Number.	Infant mortality rate.	Per cent distribution.
All causes.....	191	183.5	100.0	129	224.7	100.0	62	132.8	100.0
Gastric and intestinal diseases.....	70	67.2	36.6	54	94.1	41.9	16	34.3	26.8
Respiratory diseases.....	29	27.9	15.2	18	31.4	14.0	11	23.6	17.7
Malformations.....	13	12.5	6.8	7	12.2	5.4	6	12.8	9.7
Early infancy.....	43	41.3	22.5	30	52.3	23.3	13	27.8	21.0
Premature birth.....	16	15.4	8.4	14	24.4	10.9	2	4.3	3.2
Congenital debility.....	26	25.0	13.6	15	26.1	11.6	11	23.6	17.7
Injuries at birth.....	1	1.0	.5	1	1.7	.8			
Epidemic diseases.....	4	3.8	2.1	3	5.2	2.3	1	2.1	1.6
Diseases ill defined or unknown.....	11	10.6	5.8	5	8.7	3.9	6	12.8	9.7
All other causes.....	21	20.2	11.0	12	20.9	9.3	9	19.3	14.5

A distribution of deaths by cause in the several wards shows a proportionately large number of deaths from gastric and intestinal diseases in every ward—in all but the fifth and seventh wards more than a third of all the deaths. In ward 2, in which the largest number of deaths occurs, 45.1 per cent of this number were from gastric and intestinal diseases. It would seem, therefore, that a reduction of infant mortality not only in the city as a whole but in practically every ward of the city is largely a matter of reducing the number of deaths from this one cause.



TABLE 10.

Cause of death.	Deaths among infants born during selected year.									
	Total.	Ward of residence.								
		1	2	3	4	5	6	7	8	9
All causes.....	258	19	51	27	34	17	22	21	19	48
Gastric and intestinal diseases.....	99	7	23	10	13	5	9	5	9	18
Respiratory diseases.....	41	.....	6	2	10	2	6	4	4	7
Malformations.....	14	2	2	1	1	1	2	2	1	2
Early infancy.....	62	8	14	7	4	6	5	5	2	11
Premature birth.....	23	3	5	2	.....	4	4	2	1	2
Congenital debility.....	38	5	8	5	4	2	1	3	1	9
Injuries at birth.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....
Epidemic diseases.....	5	.....	1	1	.....	1	.....	1	.....	1
Diseases ill defined or unknown.....	11	1	2	2	3	1	.....	1	.....	1
All other causes.....	26	1	3	4	3	1	.....	3	3	8

PER CENT DISTRIBUTION.

All causes.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Gastric and intestinal diseases.....	38.4	36.8	45.1	37.0	38.2	29.4	40.9	23.8	47.4	37.5
Respiratory diseases.....	15.9	.....	11.8	7.4	29.4	11.8	27.3	19.0	21.1	14.6
Malformations.....	5.4	10.5	3.9	3.7	2.9	5.9	9.1	9.5	5.3	4.2
Early infancy.....	24.0	42.1	27.5	25.9	11.8	35.3	22.7	23.8	10.5	22.9
Premature birth.....	8.9	15.8	9.8	7.4	.....	23.5	18.2	9.5	5.3	4.2
Congenital debility.....	14.7	26.3	15.7	18.5	11.8	11.8	4.5	14.3	5.3	18.8
Injuries at birth.....	.4	.....	2.0	.....	.....	.....	.....	.....	.....	.....
Epidemic diseases.....	1.9	.....	2.0	3.7	.....	5.9	.....	4.8	.....	2.1
Diseases ill defined or unknown.....	4.3	5.3	3.9	7.4	8.8	5.9	.....	4.8	.....	2.1
All other causes.....	10.1	5.3	5.9	14.8	8.8	5.9	.....	14.3	15.8	16.7

SEASON AND CLIMATE.

**Deaths by seasons.**—The season of the year has a close relation to the medical cause of death. The data obtained in Manchester on this point agree with observation and experience generally. The summer months are hardest for the baby on account of the greater prevalence of gastric and intestinal diseases during the warm weather. The three months showing the largest number of infant deaths were July, August, and September, with 32, 48, and 27 deaths, respectively, in each of which months a large proportion of the deaths was from gastric and intestinal causes. In August 35 deaths were from these diseases alone, more than occurred in any other month from all causes combined. May showed the next largest number of deaths, namely, 25, but no one cause predominated, and apparently climatic conditions do not explain the large number. In January and February, the coldest months in Manchester, also occurred a relatively large number of deaths, 22 and 20, respectively. Deaths from respiratory diseases occurred chiefly in these two months and in the next two, March and April, which cover the break-up of winter. The distribution by months of deaths due to other causes showed no striking grouping of significance. (See Table 11.)

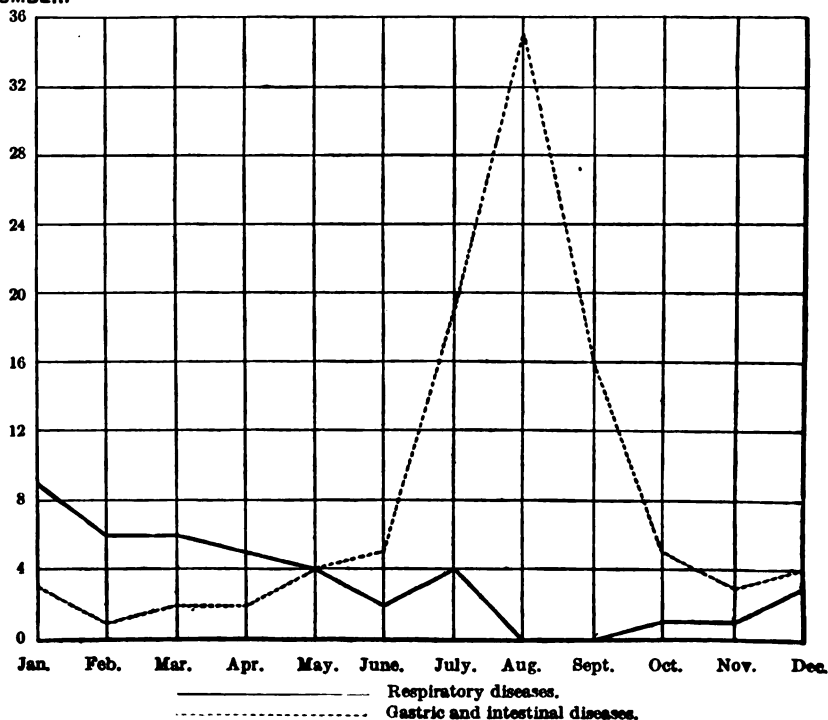
The prevalence of gastric and intestinal diseases in summer and of respiratory diseases in winter is shown graphically in Diagram III. The rapid increase in the number of deaths from gastric and intestinal diseases from June to August and the equally rapid decrease in the number from August to October are the significant points brought out.

TABLE 11.

TABLE 11.	Deaths among infants born during selected year.												
Cause of death.	Total.	Occurring in specified month.											
		January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
All causes. ....	258	22	20	15	15	25	17	32	48	27	13	9	15
Gastric and intestinal diseases. ....	99	3	1	2	2	4	5	19	35	16	5	3	4
Respiratory diseases. ....	41	9	6	6	5	4	2	4	...	...	1	1	3
Malformations. ....	14	1	3	1	3	...	...	4	...	...	1	1	...
Early infancy. ....	62	5	5	5	1	9	8	4	8	7	3	2	5
Premature birth. ....	23	1	2	1	...	3	4	2	4	3	1	...	3
Congenital debility. ....	38	4	3	3	1	6	4	2	4	4	2	2	3
Injuries at birth. ....	1	...	...	1	...	...	...	...	...	...	...	...	...
Epidemic diseases. ....	5	...	...	...	1	2	...	...	1	1	...	...	...
Diseases ill defined or unknown. ....	11	1	1	...	...	2	1	...	3	...	2	1	...
All other causes. ....	26	3	4	1	3	4	1	1	1	3	2	1	3

DIAGRAM III.—INFANT DEATHS OCCURRING IN SPECIFIED MONTH, FROM GASTRIC AND INTESTINAL DISEASES AND RESPIRATORY DISEASES.

NUMBER.



**Climate.**—The climate of Manchester apparently offers no special disadvantage to infant life unless it be that the long, cold winters may swell the death rate from broncho-pneumonia and other respiratory diseases. The climate is somewhat more equable than that of the same latitude (40° north) farther west, and the average rainfall is greater. It is generally regarded as agreeable and healthful and the high death rate from gastric and intestinal diseases in the summer months can not be ascribed to exceptionally long, hot summers. The average temperature in 1913 at Concord, N. H., the nearest United States meteorological station, was 48° F.; the highest temperature of the year was 99° in July; the lowest, -7° in February. The records of the United States Weather Bureau were also examined to discover whether the seasonal conditions which prevailed in Manchester during the period covered by the investigation were in any way exceptional, but such was found not to be the case.

**Month of birth.**—Another factor to be taken into consideration in connection with the distribution of deaths by cause and season is the month of birth. The baby's age when subjected to special hazards, such as summer heat and diarrheal epidemics, makes a difference in its power of resistance. Babies born during the late summer and early fall months in Manchester appeared to have the best chance of survival. October babies made the best showing of all, with an infant mortality rate of but 90.9. August and September babies showed rates of 119.7 and 117.2, respectively. Babies born in May and June, who were very young to face the summer months, had the highest death rates, namely, 227.3 and 234, respectively. Babies born in July and August had lower death rates, perhaps because fewer of them were weaned before the end of the hot season. The numbers, however, are too small to justify any positive deductions.

TABLE 12.

Month of birth.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent.
			Number.	Infant mortality rate.		
The year.....	1,643	1,564	258	165.0	79	4.8
November, 1912.....	118	109	24	220.2	9	7.6
December, 1912.....	124	111	14	126.1	13	10.5
January, 1913.....	130	127	26	204.7	3	2.3
February, 1913.....	134	128	21	164.1	6	4.5
March, 1913.....	139	135	20	148.1	4	2.9
April, 1913.....	152	148	24	162.2	4	2.6
May, 1913.....	138	132	30	227.3	6	4.3
June, 1913.....	146	141	33	234.0	5	3.4
July, 1913.....	149	142	23	162.0	7	4.7
August, 1913.....	147	142	17	119.7	5	3.4
September, 1913.....	138	128	15	117.2	10	7.2
October, 1913.....	128	121	11	90.9	7	5.5

TABLE 13.

TABLE 13.	Deaths among infants born during selected year.												
	Month of birth.	Total.	Occurring in specified month of age.										
			First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.	Eleventh.
The year .....	258	72	24	24	18	18	21	18	11	20	11	9	12
November, 1912.....	24	5	3	3	.....	1	2	.....	1	5	2	1	1
December, 1912.....	14	3	.....	2	.....	.....	1	1	2	3	2	.....	.....
January, 1913.....	26	7	4	1	2	1	3	4	2	2	.....	.....	.....
February, 1913.....	21	7	1	.....	1	1	3	4	.....	1	1	.....	2
March, 1913.....	20	5	2	2	1	3	3	1	1	.....	1	1	.....
April, 1913.....	24	5	.....	2	6	4	3	.....	.....	1	1	1	1
May, 1913.....	30	9	1	5	2	1	2	1	3	1	1	2	2
June, 1913.....	33	7	8	4	1	3	1	1	1	2	1	1	2
July, 1913.....	23	9	1	4	.....	1	2	1	.....	.....	3	2	3
August, 1913.....	17	8	1	1	2	.....	.....	3	1	1	.....	.....	.....
September, 1913.....	15	5	.....	.....	1	2	1	.....	3	2	.....	.....	1
October, 1913.....	11	2	3	.....	2	1	.....	2	.....	1	.....	.....	.....

TABLE 14.

Month of birth.	Deaths among infants born during selected year.											
	Total.	Occurring in specified year and month.										
		1912		1913								
		No- vember.	De- cember.	Janu- ary.	Febru- ary.	March.	April.	May.	June.	July.	Aug- ust.	Sep- tem- ber.
The year.....	258	4	6	8	12	10	9	14	12	20	47	27
November, 1912.....	24	4	3	2	2	1	1	1	1	1	5	2
December, 1912.....	14	.....	3	.....	1	1	.....	1	.....	2	1	4
January, 1913.....	26	.....	.....	6	3	3	.....	2	1	5	4	2
February, 1913.....	21	.....	.....	.....	6	.....	.....	1	.....	4	3	1
March, 1913.....	20	.....	.....	.....	.....	2	4	.....	3	1	4	2
April, 1913.....	24	.....	.....	.....	.....	.....	4	1	1	3	6	5
May, 1913.....	30	.....	.....	.....	.....	.....	.....	8	1	5	2	2
June, 1913.....	33	.....	.....	.....	.....	.....	.....	.....	5	3	9	2
July, 1913.....	23	.....	.....	.....	.....	.....	.....	.....	.....	5	5	2
August, 1913.....	17	.....	.....	.....	.....	.....	.....	.....	.....	.....	8	1
September, 1913.....	15	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4
October, 1913.....	11	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

Month of birth.	Occurring in specified year and month—Continued.											
	1913			1914								
	Octo- ber.	Novem- ber.	Decem- ber.	Janu- ary.	Febru- ary.	March.	April.	May.	June.	July.	Aug- ust.	
The year.....	13	5	9	14	8	5	6	11	5	3	1	
November, 1912.....	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	
December, 1912.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
January, 1913.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	
February, 1913.....	1	1	.....	2	.....	1	.....	.....	.....	.....	.....	
March, 1913.....	1	.....	.....	2	.....	.....	1	.....	.....	.....	.....	
April, 1913.....	.....	.....	.....	2	1	1	1	.....	.....	.....	.....	
May, 1913.....	1	1	2	2	1	1	2	.....	.....	.....	.....	
June, 1913.....	3	1	1	2	2	.....	2	2	1	.....	.....	
July, 1913.....	2	.....	2	1	1	.....	.....	2	2	1	.....	
August, 1913.....	1	1	1	.....	.....	3	1	1	.....	.....	.....	
September, 1913.....	1	.....	.....	3	1	.....	.....	2	2	1	1	
October, 1913.....	2	.....	3	1	2	.....	.....	2	.....	1	.....	

STILLBIRTHS.

A total of 79 stillbirths occurred among the 1,643 births included in this study. The problem of stillbirths is closely connected with that of the deaths of live-born infants, especially the deaths due to prematurity and other prenatal causes. The stillbirth rate, or percentage of stillbirths, is given in most of the general tables parallel with the infant mortality rate.

The 79 stillbirths formed 4.8 per cent of all births considered in this study. No doubt this is an understatement of the actual number, as the registration of stillbirths is even less complete than that of live births.

**Nationality of mother.**—The percentage of stillbirths reported for foreign-born mothers was 4.9, slightly higher than that reported for native mothers, for whom it was 4.6. The highest percentage was found among the group of English, Irish, and Scotch mothers. Births to the combined group numbered 115 and 9 of these, or 7.8 per cent, were stillbirths. Among the French-Canadian mothers there were 36 stillbirths, or 5.9 per cent of all births; among Polish mothers only 6, or 3.5 per cent of all births.

TABLE 15.

Nationality of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Native mothers.....	548	523	67	128.1	25	4.6
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Canadian, French.....	610	574	129	224.7	36	5.9
Canadian, except French.....	27	27	4	.....	.....	.....
Polish.....	170	164	31	189.0	6	3.5
English, Irish, Scotch.....	115	106	7	66.0	9	7.8
Greek and Syrian.....	72	71	10	.....	1	.....
German.....	30	29	2	.....	1	.....
Jewish.....	24	24	2	.....	.....	.....
Ruthenian and Lithuanian.....	22	21	3	.....	1	.....
All other and not reported.....	25	25	3	.....	.....	.....

<sup>1</sup> Not shown where base is less than 100.

**Gainful employment of mother.**—Gainful employment of the mothers at some time during pregnancy might be expected, perhaps, to show a more definite relation to a high percentage of stillbirths than any other factor considered in this study. To some degree this appears to be the case for the group of babies under consideration. Mothers gainfully employed had a higher percentage than all mothers or than those not gainfully employed, but the highest percentage

occurred among the mothers gainfully employed away from home and the lowest among those gainfully employed at home.

TABLE 16.                      Employment of mother during year before baby's birth.		Per cent of still- births.
All mothers.....		4.8
Not gainfully employed.....		4.1
Gainfully employed.....		5.5
At home.....		1.8
Away from home.....		7.5

The percentage of stillbirths was markedly higher among the older mothers. Among babies of mothers 40 and over they formed 8.9 per cent of all births. Among babies of mothers aged 20 to 24 the percentage was lowest, namely, 3.8. In the two intervening classes, mothers aged 25 to 29 and those aged 30 to 39, the percentages were 4.9 and 4.5, respectively. Births to mothers under 20 numbered 64 and included 5 stillbirths. (See Table 19.)

#### SEX.

The infant mortality rate among the male infants was higher than that among the female, a result in accord with general experience as shown in practically all vital statistics giving such rates. The difference in rate is much more marked among the natives.

TABLE 17.                      Sex of baby and nativity of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent.
			Number.	Infant mortality rate.		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Male.....	826	781	149	190.8	45	5.4
Female.....	817	783	109	136.2	34	4.2
Native mothers.....	548	523	67	128.1	25	4.6
Male.....	268	255	44	172.5	13	4.9
Female.....	280	268	23	85.8	12	4.3
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Male.....	558	526	105	199.6	32	5.7
Female.....	537	515	86	167.0	22	4.1

**Masculinity.**—It will be noted also that the group studied shows a preponderance of male births, which fact also coincides with the usual showing for birth statistics. The ratio of sexes usually is expressed by the term masculinity, which for our group is 1,011—

that is, 1,011 male births to 1,000 female births. In their contribution to national demography,<sup>1</sup> C. J. Lewis and J. Norman Lewis present some interesting figures concerning the variation of the magnitude of masculinity, and state that "The proportion of masculine and feminine births must be the result of definite causes, and dependent on laws which are not yet adequately known," and that "Under present conditions the possession of a positive masculinity appears to be an integral necessity of a vigorous nationality. The reason for this lies in the heavier mortality which the male suffers as compared with the female in the early years of life. Male children perish not only in early years, but even in early months, at a greater rate than their sisters." Later, "The masculinity of a people rarely exceeds 1,100 or falls below 900," but, "The masculinity of stillbirths is never lower than 1,200, and rises in one instance to 1,700, though it is generally about 1,300."

The variation in masculinity among the babies of native and of foreign-born mothers in Manchester as indicated below is in practical accord with the findings above quoted:

Nativity of mother.	Masculinity (number of male per 1,000 female births).		
	All births.	Live births.	Still-births.
All mothers.....	1,011	997	1,324
Native mothers.....	957	963	1,063
Foreign-born mothers.....	1,039	1,021	1,455

#### AGE OF MOTHER AND ORDER OF BIRTH.

**Age of mother.**—The age of the mother at the time of the birth of the baby is another possible factor in infant mortality. A very high proportion of infant deaths occurred among babies born during the selected year to mothers who were 40 years of age and over—19 out of 92 live births. The highest rates, however, were found among the babies of mothers under 25 years of age. The babies of mothers aged from 30 to 39 had a rate of 146.6, which was the lowest found for any group of mothers classified according to age. The rate for this same group differs markedly, however, for native and foreign-born mothers, the babies of native mothers having a rate of 71.4 only, while those of foreign-born mothers had a rate of 176.6. The lowest infant mortality rate for any age group of foreign-born mothers occurred among babies of mothers aged from 25 to 29—namely, a rate of 165. (See Table 19.)

<sup>1</sup> Lewis, C. J. and J. Norman, *Natality and Fecundity*, London, 1906, pp. 110, 111, 121.

These numbers are too small to warrant any general conclusions in regard to the influence of the mother's age upon the infant mortality rate. Individual circumstances and the order of birth of the baby are so closely connected with the question of the age of the mother that caution must be used in drawing inferences based on age alone.

TABLE 19.

Age of mother at birth of child, and nativity.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Under 25.....	540	517	95	183.8	23	4.3
Under 20.....	64	59	12	.....	5	.....
20 to 24.....	476	458	83	181.2	18	3.8
25 to 29.....	487	463	71	153.3	24	4.9
30 to 39.....	514	491	72	146.6	23	4.5
40 and over.....	101	92	19	.....	9	8.9
Not reported.....	1	1	1	.....	.....	.....
Native mothers.....	548	523	67	128.1	25	4.6
Under 25.....	227	217	34	156.7	10	4.4
Under 20.....	33	30	5	.....	3	.....
20 to 24.....	194	187	29	155.1	7	3.6
25 to 29.....	163	154	20	129.9	9	5.5
30 to 39.....	144	140	10	71.4	4	2.8
40 and over.....	14	12	3	.....	2	.....
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Under 25.....	313	300	61	203.3	13	4.2
Under 20.....	31	29	7	.....	2	.....
20 to 24.....	282	271	54	196.3	11	3.9
25 to 29.....	324	309	51	165.0	15	4.6
30 to 39.....	370	351	62	176.6	19	5.1
40 and over.....	87	80	16	.....	7	.....
Not reported.....	1	1	1	.....	.....	.....

<sup>1</sup> Not shown where base is less than 100.

**Order of birth.**—The babies scheduled ranged from the first to the eighteenth child of the mother. Though the numbers on the whole for infants born during the selected year are too small to establish conclusively a biological tendency, one or two facts of significance emerge. First-born children had a markedly higher death rate than second-born children. Fluctuations in the rate according to order of birth after the second showed no special relation, except in the case of exceptionally large families. Babies ninth and later in order of birth, of whom there were 144 live born, had an infant mortality rate of 250, a rate higher than that for any earlier born or for the whole group of earlier born babies, which was 156.3. This fact may explain the higher rate among foreign-born than among native mothers in the age group 30 to 39. Foreign-born girls as a rule marry early and are more likely to have had by this time of life a large number of



children. It is not possible, however, to determine exactly the relative importance of the order of birth as an independent factor in the high infant mortality rate in Manchester.

TABLE 20.  Number of child in order of birth, and nativity of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
First.....	454	427	71	166.3	27	5.9
Second.....	317	310	39	125.8	7	2.2
Third.....	226	218	36	165.1	8	3.5
Fourth.....	158	150	30	200.0	8	5.1
Fifth.....	114	108	12	111.1	6	5.3
Sixth, seventh, and eighth.....	221	207	34	164.3	14	6.3
Ninth and later.....	153	144	36	250.0	9	5.9
Native mothers.....	548	523	67	128.1	25	4.6
First.....	198	184	16	87.0	14	7.1
Second.....	126	124	16	129.0	2	1.6
Third.....	90	88	12	.....	2	.....
Fourth.....	42	40	10	.....	2	.....
Fifth.....	31	31	4	.....	.....	.....
Sixth, seventh, and eighth.....	46	43	6	.....	3	.....
Ninth and later.....	15	13	3	.....	2	.....
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
First.....	256	243	55	226.3	13	5.1
Second.....	191	186	23	123.7	5	2.6
Third.....	136	130	24	184.6	6	4.4
Fourth.....	116	110	20	181.8	6	5.2
Fifth.....	83	77	8	.....	6	.....
Sixth, seventh, and eighth.....	175	164	28	170.7	11	6.3
Ninth and later.....	138	131	33	251.9	7	5.1
French-Canadian mothers.....	610	574	129	224.7	36	5.9
First.....	130	122	36	206.1	8	6.2
Second.....	99	95	12	.....	4	.....
Third.....	64	60	18	.....	4	.....
Fourth.....	59	54	8	.....	5	.....
Fifth.....	49	44	5	.....	5	.....
Sixth, seventh, and eighth.....	103	98	21	.....	5	4.9
Ninth and later.....	106	101	28	277.2	5	4.7
Other foreign-born mothers.....	485	467	62	132.8	18	3.7
First.....	126	121	19	157.0	5	4.0
Second.....	92	91	10	.....	1	.....
Third.....	72	70	6	.....	2	.....
Fourth.....	57	56	12	.....	1	.....
Fifth.....	34	33	3	.....	1	.....
Sixth, seventh, and eighth.....	72	66	7	.....	6	.....
Ninth and later.....	32	30	5	.....	2	.....

<sup>1</sup> Not shown where base is less than 100.

TABLE 21.

Number of child in order of birth, and nativity of mother.

Per cent distribution of births during selected year and of infant deaths.

	Total births.	Live births.	Infant deaths.
All mothers.....	100.0	100.0	100.0
First.....	27.6	27.3	27.5
Second.....	19.3	19.8	15.1
Third.....	13.8	13.9	14.0
Fourth.....	9.6	9.6	11.6
Fifth.....	6.9	6.9	4.7
Sixth, seventh, and eighth.....	13.5	13.2	13.2
Ninth and later.....	9.3	9.2	14.0
Native mothers.....	100.0	100.0	100.0
First.....	36.1	35.2	23.9
Second.....	23.0	23.7	23.9
Third.....	16.4	16.8	17.9
Fourth.....	7.7	7.6	14.9
Fifth.....	5.7	5.9	6.0
Sixth, seventh, and eighth.....	8.4	8.2	9.0
Ninth and later.....	2.7	2.5	4.5
Foreign-born mothers.....	100.0	100.0	100.0
First.....	23.4	23.3	28.8
Second.....	17.4	17.9	12.0
Third.....	12.4	12.5	12.6
Fourth.....	10.6	10.6	10.5
Fifth.....	7.6	7.4	4.2
Sixth, seventh, and eighth.....	16.0	15.8	14.7
Ninth and later.....	12.6	12.6	17.3
French-Canadian mothers.....	100.0	100.0	100.0
First.....	21.3	21.3	27.9
Second.....	16.2	16.6	10.1
Third.....	10.5	10.5	14.0
Fourth.....	9.7	9.4	6.2
Fifth.....	8.0	7.7	8.9
Sixth, seventh, and eighth.....	16.9	17.1	16.3
Ninth and later.....	17.4	17.6	21.7
Other foreign-born mothers.....	100.0	100.0	100.0
First.....	26.0	25.9	30.6
Second.....	19.0	19.5	16.1
Third.....	14.8	15.0	9.7
Fourth.....	11.8	12.0	19.4
Fifth.....	7.0	7.1	4.6
Sixth, seventh, and eighth.....	14.8	14.1	11.3
Ninth and later.....	6.6	6.4	8.1

**Size of family.**—The order of birth of the baby is of interest as indicating the relative tendency of the different classes to have large families. Babies ninth or later in order of birth were born chiefly in types of families with generally high infant mortality rates; 69.3 per cent were born to French-Canadian mothers, and the tendency to have many children is more common in the lower-earnings classes than in the higher. This tendency appears from the following table. Of the 1,643 babies considered, 60.7 per cent belonged to families in which the total number of births had been three or less.

TABLE 22.

Infants born during selected year.

Number of child in order of birth.	Total.		Whose fathers earned specified amount.							
			Under \$450.		\$450 to \$549.		\$550 to \$649.		\$650 to \$849.	
	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.
Total.....	1,643	100.0	225	100.0	274	100.0	297	100.0	426	100.0
First.....	454	27.6	66	29.3	72	26.3	92	31.0	90	21.1
Second.....	317	19.3	40	17.8	51	18.6	49	16.5	92	21.6
Third.....	226	13.8	32	14.2	39	14.2	29	9.8	68	16.0
Fourth.....	158	9.6	26	11.6	27	9.9	28	9.4	47	11.0
Fifth.....	114	6.9	14	6.2	13	4.7	29	9.8	28	6.6
Sixth.....	96	5.8	13	5.8	14	5.1	20	6.7	28	6.6
Seventh.....	74	4.5	9	4.0	15	5.5	16	5.4	17	4.0
Eighth.....	51	3.1	3	1.3	7	2.6	12	4.0	17	4.0
Ninth.....	39	2.4	7	3.1	6	2.2	2	.7	9	2.1
Tenth.....	37	2.3	7	3.1	5	1.8	5	1.7	14	3.3
Eleventh.....	25	1.5	3	1.3	7	2.6	3	1.0	8	1.9
Twelfth.....	20	1.2	1	.4	10	3.6	4	1.3	3	.7
Thirteenth.....	13	.8	2	.9	3	1.1	3	1.0	1	.2
Fourteenth.....	9	.5	2	.9			2	.7	3	.7
Fifteenth.....	3	.2			1	.4	1	.3		
Sixteenth.....	6	.4			3	1.1	2	.7	1	.2
Eighteenth.....	1	.1			1	.4				

Whose fathers earned specified amount—Continued.

	\$850 to \$1,049.		\$1,050 to \$1,249.		\$1,250 and over.		No earnings. <sup>1</sup>		Not reported.	
	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.	Num-ber.	Per cent distri-bution.
Total.....	199	100.0	72	100.0	105	100.0	24	100.0	21	100.0
First.....	61	30.7	21	29.2	38	36.2	9	37.5	5	23.8
Second.....	42	21.1	14	19.4	27	25.7			2	9.5
Third.....	32	16.1	10	13.9	9	8.6	4	16.7	3	14.3
Fourth.....	10	5.0	6	8.3	9	8.6	3	12.5	2	9.5
Fifth.....	16	8.0	5	6.9	6	5.7	1	4.2	2	9.5
Sixth.....	11	5.5	4	5.6	4	3.8	1	4.2	1	4.8
Seventh.....	9	4.5	1	1.4	5	4.8			2	9.5
Eighth.....	6	3.0	3	4.2	2	1.9	1	4.2		
Ninth.....	4	2.0	4	5.6	3	2.9	3	12.5	1	4.8
Tenth.....	1	.5	1	1.4	1	1.0			3	14.3
Eleventh.....	2	1.0	1	1.4			1	4.2		
Twelfth.....	2	1.0								
Thirteenth.....	2	1.0	1	1.4			1	4.2		
Fourteenth.....	1	.5			1	1.0				
Fifteenth.....			1	1.4						

<sup>1</sup> Includes 1 father living on his income.

# ATTENDANT AT BIRTH.

The question of attendant at birth is of importance in all communities and especially in those with a large foreign population accustomed to the services of a midwife or even to some extent to doing without trained care at childbirth. In Manchester, however, this custom is not general, for in 90.1 per cent of the registered births considered the mother had a physician in attendance at birth and in only 9.3 per cent a midwife. The practice of the native mothers

differed considerably from that of the foreign-born, 98.9 per cent of the former having been attended by a physician and only 85.8 per cent of the latter.

Attendant at birth.	Births during selected year to—					
	All mothers.		Native mothers.		Foreign-born mothers.	
	Number.	Per cent distribution.	Number.	Per cent distribution.	Number.	Per cent distribution.
All classes.....	1,643	100.0	548	100.0	1,095	100.0
Physician.....	1,481	90.1	542	98.9	939	85.8
Midwife.....	153	9.3	4	.7	149	13.6
Other, none, or not reported.....	9	.5	2	.4	7	.6

The proportion of cases accredited to midwives is doubtless an understatement, as in cases of difficult labor the midwife frequently calls in a physician and the case is accredited to him.

It was seldom the custom of mothers to seek medical advice during pregnancy, and many of the poorer mothers, and especially of the foreign-born, resumed part or all of their customary duties within a few days after the birth of the baby. Nevertheless a considerable number even among this group did remain in bed at least a week or 10 days after childbirth, with the services either of a practical nurse or of a visiting nurse from some philanthropic organization, or at least under the care of members of the family. It was not at all uncommon for the husband to act as nurse, particularly among the French Canadians. In these families in some cases where there were no grown children the husband continued to relieve the mother of the heavy housework, such as scrubbing and washing, for a number of weeks after confinement.

#### ECONOMIC AND INDUSTRIAL FACTORS.

Babies born into the homes of unskilled workers where earnings are small face greater hazards than those in more fortunate circumstances. When the 1,564 live-born babies included in this study are grouped according to father's earnings, it is found that among the babies in the lowest-earnings group infant deaths are more than four times as frequent as in the highest-earnings group.

Another point which appears from a study of the findings is that gainful employment of the mother away from home was accompanied by a high infant mortality rate, higher even than that for all babies in the low-earnings groups.

**Occupation of father.**—The great majority of the babies included in this study had fathers who were engaged in occupations outside of professional, clerical, and mercantile groups; 725 of them were factory operatives. The majority of these, 442, were textile opera-

tives, but in all 597 babies had fathers employed in textile mills in some capacity, either as operatives or as laborers, teamsters, clerks, etc.

TABLE 24.

Occupation of father.	Infants born during selected year.									
	Total.	Whose fathers earned specified amount.								
		Under \$450.	\$450 to \$549.	\$550 to \$649.	\$650 to \$849.	\$850 to \$1,049.	\$1,050 to \$1,249.	\$1,250 and over.	No earnings. <sup>1</sup>	Not reported.
All occupations <sup>2</sup> .....	1,643	225	274	297	426	199	72	105	24	21
Manufacturing and mechanical industries.....	1,066	181	214	212	291	98	34	33	13	10
Blacksmiths.....	7	2	2	.....	2	1	.....	.....	.....	.....
Boilermakers.....	8	.....	.....	4	3	1	.....	.....	.....	.....
Builders and contractors.....	9	.....	.....	2	1	3	2	1	.....	.....
Compositors, linotype operators, and pressmen.....	6	1	1	1	2	.....	1	.....	.....	.....
Electricians.....	12	.....	.....	1	4	5	1	1	.....	.....
Engineers and firemen.....	42	.....	2	8	26	1	.....	2	2	1
Factory operatives.....	725	154	165	145	161	48	26	11	10	5
Textile.....	442	121	129	87	78	11	4	1	7	4
Shoe.....	200	24	26	38	65	23	11	6	1	1
Cigar and tobacco.....	31	1	1	2	6	7	10	4	.....	.....
Other industries.....	52	8	9	18	12	2	1	.....	2	.....
Laborers, helpers, and apprentices.....	56	14	17	14	10	1	.....	.....	.....	.....
Machinists, millwrights, and toolmakers.....	34	.....	5	5	15	6	1	2	.....	.....
Manufacturers (officials and managers).....	17	.....	.....	.....	2	2	1	12	.....	.....
Shoemakers and cobblers.....	7	.....	2	.....	.....	2	.....	2	.....	1
Skilled mechanics, building trades.....	138	8	17	30	56	21	1	1	1	3
Tailors.....	10	.....	1	1	5	1	1	1	.....	.....
Other pursuits.....	15	2	2	1	4	6	.....	.....	.....	.....
Trade.....	240	15	24	41	57	39	15	43	2	4
Bankers, brokers, real estate and insurance agents.....	15	.....	.....	.....	.....	4	4	7	.....	.....
Commercial travelers and salesmen.....	67	2	3	12	17	17	4	10	.....	2
Deliverymen.....	56	4	10	18	21	2	1	.....	.....	.....
Laborers.....	13	6	3	1	3	.....	.....	.....	.....	.....
Retail and wholesale dealers (proprietors, officials, and managers).....	80	3	8	9	10	14	6	26	2	2
Other pursuits.....	9	.....	.....	1	6	2	.....	.....	.....	.....
Domestic and personal service.....	90	7	11	6	29	22	6	6	1	2
Barbers.....	19	.....	2	2	9	4	.....	2	.....	.....
Saloonkeepers and bartenders.....	29	2	2	3	3	13	2	3	.....	1
Servants.....	10	1	.....	.....	8	1	.....	.....	.....	.....
Other pursuits.....	32	4	7	1	9	4	4	1	1	1
Transportation.....	88	9	11	18	25	13	7	5	.....	.....
Chauffeurs, teamsters, and expressmen.....	35	5	8	11	8	2	.....	1	.....	.....
Conductors, motormen, and trainmen.....	27	.....	1	4	11	6	2	3	.....	.....
Express, post, telegraph, and telephone employees.....	6	.....	.....	.....	1	.....	5	.....	.....	.....
Laborers.....	13	4	2	3	3	1	.....	.....	.....	.....
Proprietors, officials, and managers.....	3	.....	.....	.....	.....	2	.....	1	.....	.....
Other pursuits.....	4	.....	.....	.....	2	2	.....	.....	.....	.....

<sup>1</sup> Includes 1 father living on his income.

<sup>2</sup> Of 597 fathers in the textile industry 442 were operatives and 155 employees engaged in occupations not peculiar to the industry, such as officials, clerks, carpenters, teamsters, etc. The latter were classified in the occupational groups to which they belong.

TABLE 24—Continued.

Occupation of father.	Infants born during selected year.								
	Total.	Whose fathers earned specified amount.							
		Under \$450.	\$450 to \$549.	\$550 to \$649.	\$650 to \$849.	\$850 to \$1,049.	\$1,050 to \$1,249.	\$1,250 and over.	No earnings.
Clerical occupations, all industries.....	39	1	1	8	15	9	1	4	.....
Public service.....	33	4	6	7	4	7	2	2	.....
Laborers.....	22	4	6	7	4	.....	.....	.....	.....
Officials, firemen, and policemen.....	11	.....	.....	.....	.....	7	2	2	.....
Professional and semiprofessional pursuits.....	27	1	.....	1	2	5	6	11	.....
Agriculture and forestry...	20	2	4	4	3	4	.....	1	.....
Farmers.....	8	1	.....	1	1	3	.....	1	.....
Farm laborers.....	10	1	4	2	2	1	.....	.....	.....
Others.....	2	.....	.....	1	.....	.....	.....	.....	.....
No occupation <sup>1</sup> .....	7	.....	.....	.....	.....	.....	.....	.....	7
Not reported.....	13	5	3	.....	.....	2	1	.....	1

<sup>1</sup> Includes 1 father living on his income.

**Father's earnings an index of economic status.**—The father's earnings, it is believed, furnish the most reliable index to the economic status of the family because in most cases they are not only the chief support but also the most stable and regular element in the family income. Supplementary sources of income such as mother's and children's earnings are likely to be temporary and fluctuating. A special objection to lumping father's earnings with the earnings of the mother and children is that the gainful employment of the latter indicates a low economic status which would tend to be obscured were their earnings combined. Furthermore, the increase in family income due to mother's going to work is one brought about by creating a possible factor in infant mortality, namely, the withdrawal of the mother's care. Income derived from property is found chiefly in the group of fathers earning \$1,250 or more, all of whom are classed together in any event. The father's earnings therefore best represent the scale of living attainable through a period of years and fix the living habits and the real economic status of the family.

Rates of pay can not be computed from the earnings reported. On account of lack of employment or for other reasons the father may not have worked steadily. It can not be inferred, because a father earned, for example, only \$350 in a year's time that his unit rate was so low that he could not have earned more if at work full time throughout the year.

**Distribution of economic groups.**—A classification of babies on the basis of father's earnings shows that the fathers of 48.4 per cent, or

nearly half of them, earned less than \$650 a year and that the fathers of 74.4 per cent, approximately three-fourths, earned under \$850. Only 6.4 per cent had fathers earning \$1,250 or more, while 225, or 13.7 per cent of the whole number, had fathers who earned less than \$450. In addition to those for whom earnings were reported the fathers of 23 babies either had died or, during the year following the child's birth, did not contribute to the support of their families because they had deserted or had earned nothing on account of illness. In the case of 21 babies the father's earnings could not be ascertained. (See Table 25.)

DIAGRAM IV.—PER CENT OF BIRTHS TO ALL MOTHERS, NATIVE MOTHERS AND FOREIGN-BORN MOTHERS, ACCORDING TO FATHER'S EARNINGS.

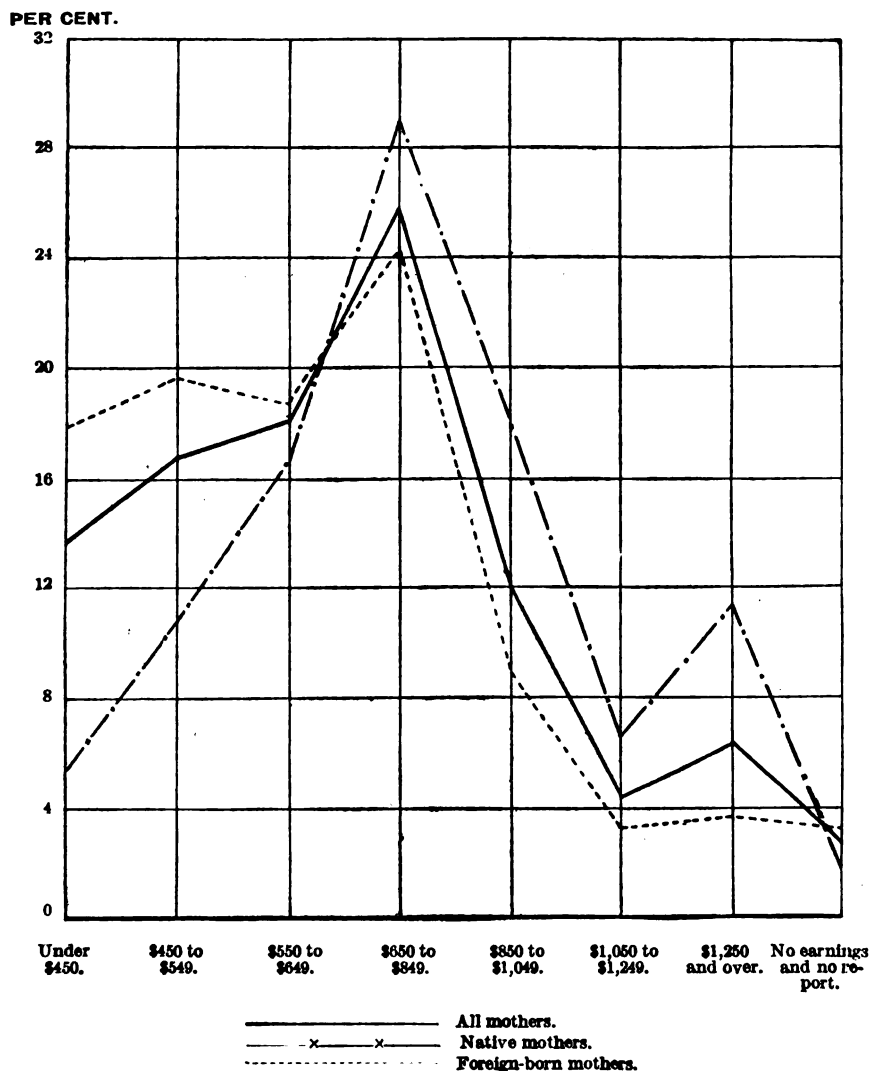


TABLE 25.

Earnings of father.	Births during selected year to—					
	All mothers.		Native mothers.		Foreign-born mothers.	
	Number.	Per cent distribution.	Number.	Per cent distribution.	Number.	Per cent distribution.
All classes.....	1,643	100.0	548	100.0	1,095	100.0
Under \$450.....	225	13.7	29	5.3	196	17.9
\$450 to \$549.....	274	16.7	59	10.8	215	19.6
\$550 to \$649.....	297	18.1	92	16.8	205	18.7
\$650 to \$849.....	426	25.9	160	29.2	266	24.3
\$850 to \$1,049.....	199	12.1	100	18.2	99	9.0
\$1,050 to \$1,249.....	72	4.4	36	6.6	36	3.3
\$1,250 and over.....	105	6.4	63	11.5	42	3.8
No earnings <sup>1</sup> .....	24	1.5	5	.9	19	1.7
Not reported.....	21	1.3	4	.7	17	1.6

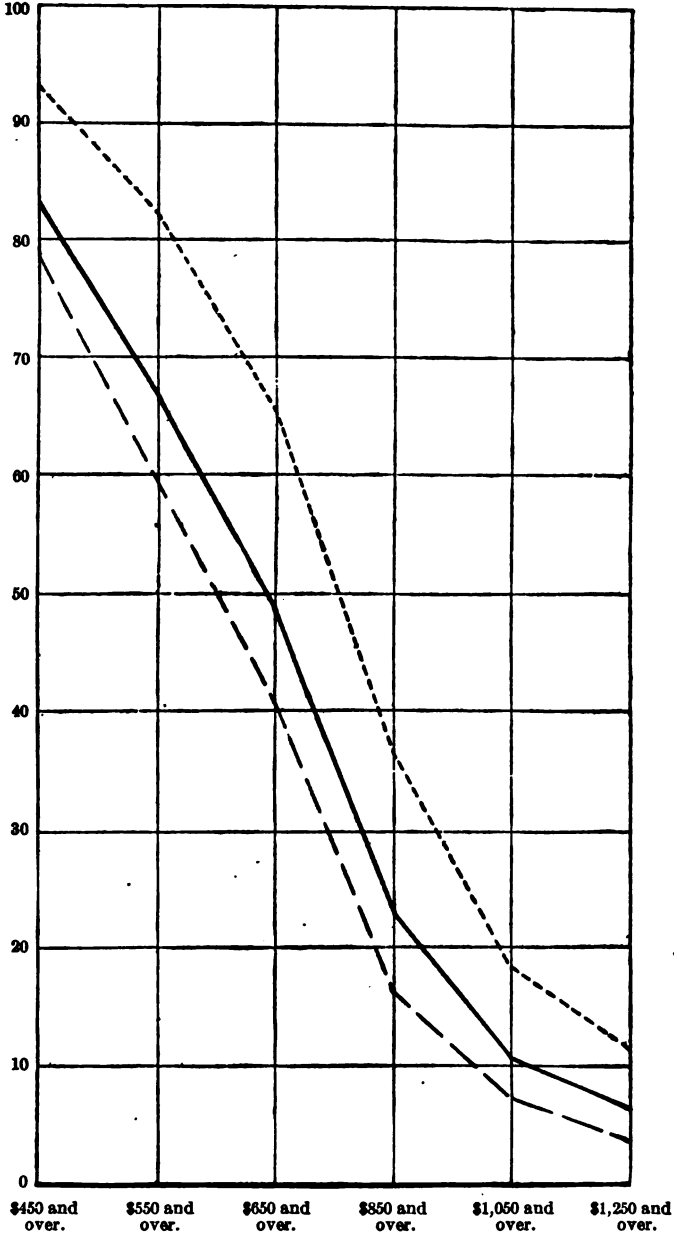
<sup>1</sup> Includes 1 father living on his income.

The same economic facts shown in the preceding table and diagram are presented in a somewhat different form in the next diagram, which shows cumulative groups by father's earnings—that is, those earning a specified amount and over.



**DIAGRAM V.—PER CENT OF BIRTHS TO ALL MOTHERS, NATIVE MOTHERS, AND FOREIGN-BORN MOTHERS IN GROUPS WHERE FATHERS EARNED SPECIFIED AMOUNTS AND OVER.**

PER CENT.



Earnings of father.	Percentage of births to—		
	All mothers.	Native mothers.	Foreign-born mothers.
\$450 and over.....	83.6	93.1	78.8
\$550 and over.....	66.9	82.3	59.2
\$650 and over.....	48.8	65.5	40.5
\$850 and over.....	22.9	36.3	16.2
\$1,050 and over.....	10.8	18.1	7.1
\$1,250 and over.....	6.4	11.5	3.8

————— All mothers.  
 - - - - - Native mothers.  
 - - - - - Foreign-born mothers.

**Infant mortality rate by father's earnings.**—The infant mortality rate shows a marked and almost regular decline as the father's earnings become larger. In the group of babies where the father's earnings are less than \$450 per annum the infant mortality rate is 242.9, while in the next group, where the fathers earn from \$450 to \$549, the rate is 173.6. It rises very slightly in the next class, \$550 to \$649, namely, to 174.5, and thereafter drops steadily with each advance in economic status. The rate, however, does not fall below 100 until the father's earnings reach \$1,050 or more. Babies whose fathers earn \$1,250 and over per annum have a death rate of only 58.3.

TABLE 26.

Earnings of father and nativity of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Under \$450.....	225	210	51	242.9	15	6.7
\$450 to \$549.....	274	265	46	173.6	9	3.3
\$550 to \$649.....	297	275	48	174.5	22	7.4
\$650 to \$849.....	426	406	66	162.6	20	4.7
\$850 to \$1,049.....	199	192	24	125.0	7	3.5
\$1,050 to \$1,249.....	72	71	5	.....	1	.....
\$1,250 and over.....	105	103	6	58.3	2	1.9
No earnings <sup>2</sup> .....	24	22	8	.....	2	.....
Not reported.....	21	20	4	.....	1	.....
Native mothers.....	548	523	67	128.1	25	4.6
Under \$450.....	29	23	5	.....	6	.....
\$450 to \$549.....	59	58	3	.....	1	.....
\$550 to \$649.....	92	85	18	.....	7	.....
\$650 to \$849.....	160	155	22	141.9	5	3.1
\$850 to \$1,049.....	100	97	13	.....	3	3.0
\$1,050 to \$1,249.....	36	35	1	.....	1	.....
\$1,250 and over.....	63	62	1	.....	1	.....
No earnings <sup>2</sup> .....	5	4	2	.....	1	.....
Not reported.....	4	4	2	.....	.....	.....
Foreign-born mothers.....	1,086	1,041	191	183.5	54	4.9
Under \$450.....	196	187	46	246.0	9	4.6
\$450 to \$549.....	215	207	43	207.7	8	3.7
\$550 to \$649.....	205	190	30	157.9	15	7.3
\$650 to \$849.....	266	251	44	175.3	15	5.6
\$850 to \$1,049.....	99	95	11	.....	4	.....
\$1,050 to \$1,249.....	36	36	4	.....	.....	.....
\$1,250 and over.....	42	41	5	.....	1	.....
No earnings <sup>2</sup> .....	19	18	6	.....	1	.....
Not reported.....	17	16	2	.....	1	.....
French-Canadian mothers.....	610	574	129	224.7	36	5.9
Under \$450.....	52	48	15	.....	4	.....
\$450 to \$549.....	121	117	28	239.3	4	3.3
\$550 to \$649.....	133	123	24	195.1	10	7.5
\$650 to \$849.....	177	165	38	230.3	12	6.8
\$850 to \$1,049.....	68	65	10	.....	3	.....
\$1,050 to \$1,249.....	18	18	3	.....	.....	.....
\$1,250 and over.....	22	21	5	.....	1	.....
No earnings <sup>2</sup> .....	10	9	4	.....	1	.....
Not reported.....	9	8	2	.....	1	.....
Other foreign-born mothers.....	485	467	62	132.8	18	3.7
Under \$450.....	144	139	31	223.0	5	3.5
\$450 to \$549.....	94	90	15	.....	4	.....
\$550 to \$649.....	72	67	6	.....	5	.....
\$650 to \$849.....	89	86	6	.....	3	.....
\$850 to \$1,049.....	31	30	1	.....	1	.....
\$1,050 to \$1,249.....	18	18	1	.....	.....	.....
\$1,250 and over.....	20	20	.....	.....	.....	.....
No earnings <sup>2</sup> .....	9	9	2	.....	.....	.....
Not reported.....	8	8	.....	.....	.....	.....

<sup>1</sup> Not shown where base is less than 100.<sup>2</sup> Includes 1 father living on his income.

The following diagram graphically illustrates the constancy with which infant death rates fall as earnings rise.

DIAGRAM VI.—INFANT MORTALITY RATE BY FATHER'S EARNINGS.



**Father's earnings supplemented.**—The families of 924 babies, 56.2 per cent of the whole number, had other sources of income than the father's earnings. Supplementary income derived from earnings of mother and children occurred more frequently, as might be expected, where the father's earnings were low than in the class with higher earnings, for low earnings of the father often necessitate gainful employment of other members of the family. Mother's earnings where derived from boarders or lodgers were reported gross—that is, as the total receipts from these sources. Actual net profit from real estate could never be ascertained, and rentals, therefore, were always reported gross. The data on total income, it will be seen, are much less reliable than those regarding father's earnings on account of the difficulty in general of ascertaining the facts in regard to such income, and in particular of separating net income from gross.

**Total income.**—Though the information obtained on total family income is not wholly accurate, the indications are that in the group of families studied in Manchester supplementary sources of income, where they existed, were of much less importance in determining the family's economic standing than was the father's contribution. In the group where the father's earnings were under \$550 per annum other sources of income existed in 76 per cent of the cases, and only 95, or 25.1 per cent, of 379 such families had their whole income brought up to \$850 or more. Where the father's earnings were from \$550 to \$649 per annum the families of 55.2 per cent of the babies had other sources of income, but less than half of those reporting other income had a total annual income of more than \$850. The relative importance of other sources of income continues to grow less as the father's earnings increase.

TABLE 27.

Total family income.	Infants born during selected year.							
	Total.		Whose fathers earned specified amount.					
			Under \$550.		\$550 to \$649.		\$650 to \$849.	
	Num- ber.	Per cent distrib- ution.	Num- ber.	Per cent distrib- ution.	Num- ber.	Per cent distrib- ution.	Num- ber.	Per cent distrib- ution.
All classes.....	1,643	100.0	499	100.0	297	100.0	426	100.0
Own income.....	1	.1						
Income from father's earnings only.....	718	43.7	120	24.0	133	44.8	212	49.8
Income including more than fa- ther's earnings.....	924	56.2	379	76.0	164	55.2	214	50.2
Under \$550.....	81	4.9	68	13.6				
\$550 to \$649.....	102	6.2	83	16.6	16	5.4		
\$650 to \$849.....	245	14.9	117	23.4	66	22.2	61	14.3
\$850 to \$1,049.....	199	12.1	59	11.8	35	11.8	81	19.0
\$1,050 to \$1,249.....	95	5.8	14	2.8	17	5.7	37	8.7
\$1,250 and over.....	149	9.1	22	4.4	22	7.4	30	7.0
Not reported.....	53	3.2	16	3.2	8	2.7	5	1.2

TABLE 27—Continued.

Total family income.	Infants born during selected year—Continued.									
	Whose fathers earned specified amount—Continued.									
	\$850 to \$1,049.		\$1,050 to \$1,249.		\$1,250 and over.		No earnings.		Not reported.	
	Num-ber.	Percent distribution.	Num-ber.	Percent distribution.	Num-ber.	Percent distribution.	Num-ber.	Percent distribution.		
All classes.....	199	100.0	72	100.0	105	100.0	24	100.0		21
Own income.....							1	4.2		
Income from father's earnings only.....	119	59.8	55	76.4	75	71.4				4
Income including more than father's earnings.....	80	40.2	17	23.6	30	28.6	23	95.8		17
Under \$550.....							13	54.2		
\$550 to \$849.....							3	12.5		
\$850 to \$1,049.....							1	4.2		
\$1,050 to \$1,249.....	21	10.6					3	12.5		
\$1,250 and over.....	25	12.6	2	2.8						
Not reported.....	30	15.1	15	20.8	30	28.6				
	4	2.0					3	12.5		17

Father's earnings and employment of mother.—Gainful employment of the mother, in so far as it accompanies low earnings of the father, would naturally be associated with a high infant mortality rate. It may act independently, however, and either add to the disadvantages which the baby suffers on account of poverty or mitigate them according to whether the loss of the mother's care, which it involves, is offset or not by the added income. But in general the babies of working mothers in Manchester had a higher infant mortality rate than babies whose mothers were not gainfully employed.

It has been often alleged that in industrial communities such as Manchester, which offer ready employment for women, the reason married women and mothers seek gainful employment is either because of the temptation to earn pin money or money for some special purpose such as the buying of a home or because women learn economic independence before marriage and prefer the factory to housework. Individual instances of this sort were encountered in Manchester, but insufficient or low earnings on the part of the father appear to be the most potent reason for the mother's going to work. Where the fathers earned less than \$450 a year 73.3 per cent of the mothers were gainfully employed during some part of the year after the baby's birth. With each rise in economic status the proportion of babies with mothers gainfully employed falls but does not really reach a small proportion, 9.6 per cent, until the group with fathers earning \$1,050 and over a year is reached. These proportions, however, are markedly different among the native and the foreign born, particularly those other than French Canadians. (See Table 28.)

Of the 722 babies whose mothers were gainfully employed the year after childbirth 45.4 per cent were in families where the earnings of

the father were under \$550 per annum; 63.6 per cent where the earnings were under \$650; and 85.2 per cent where the fathers earned under \$850 a year.

TABLE 28.

Earnings of father and nativity of mother.	Births <sup>1</sup> during selected year.		
	Total.	To mothers gainfully employed during year following baby's birth.	
		Number.	Per cent.
All mothers.....	1,643	722	43.9
Under \$450.....	225	165	73.3
\$450 to \$549.....	274	163	59.5
\$550 to \$649.....	297	131	44.1
\$650 to \$849.....	426	156	36.6
\$850 to \$1,049.....	199	68	27.6
\$1,050 to \$1,249.....	72	7	9.7
\$1,250 and over.....	105	10	9.5
No earnings <sup>2</sup> .....	24	22	.....
Not reported.....	21	13	.....
Native mothers.....	548	167	30.5
Under \$450.....	29	16	55.2
\$450 to \$549.....	59	29	49.2
\$550 to \$649.....	92	33	35.9
\$650 to \$849.....	160	50	31.3
\$850 to \$1,049.....	100	24	24.0
\$1,050 to \$1,249.....	36	3	8.3
\$1,250 and over.....	63	5	7.9
No earnings <sup>2</sup> .....	5	5	.....
Not reported.....	4	2	.....
Foreign-born mothers.....	1,095	555	50.7
Under \$450.....	198	149	75.0
\$450 to \$549.....	215	124	62.3
\$550 to \$649.....	205	98	47.8
\$650 to \$849.....	266	106	39.8
\$850 to \$1,049.....	99	31	31.3
\$1,050 to \$1,249.....	36	4	11.1
\$1,250 and over.....	42	5	11.9
No earnings <sup>2</sup> .....	19	17	.....
Not reported.....	17	11	.....
French-Canadian mothers.....	610	253	41.5
Under \$450.....	52	39	55.8
\$450 to \$549.....	121	62	51.2
\$550 to \$649.....	133	61	45.9
\$650 to \$849.....	177	61	34.5
\$850 to \$1,049.....	68	22	32.4
\$1,050 to \$1,249.....	18	2	11.1
\$1,250 and over.....	22	2	9.1
No earnings <sup>2</sup> .....	10	9	.....
Not reported.....	9	5	.....
Other foreign-born mothers.....	485	302	62.3
Under \$450.....	144	120	83.3
\$450 to \$549.....	94	72	76.6
\$550 to \$649.....	72	37	51.4
\$650 to \$849.....	89	45	50.6
\$850 to \$1,049.....	31	9	29.0
\$1,050 to \$1,249.....	18	2	11.1
\$1,250 and over.....	20	3	15.0
No earnings <sup>2</sup> .....	9	8	.....
Not reported.....	8	6	.....

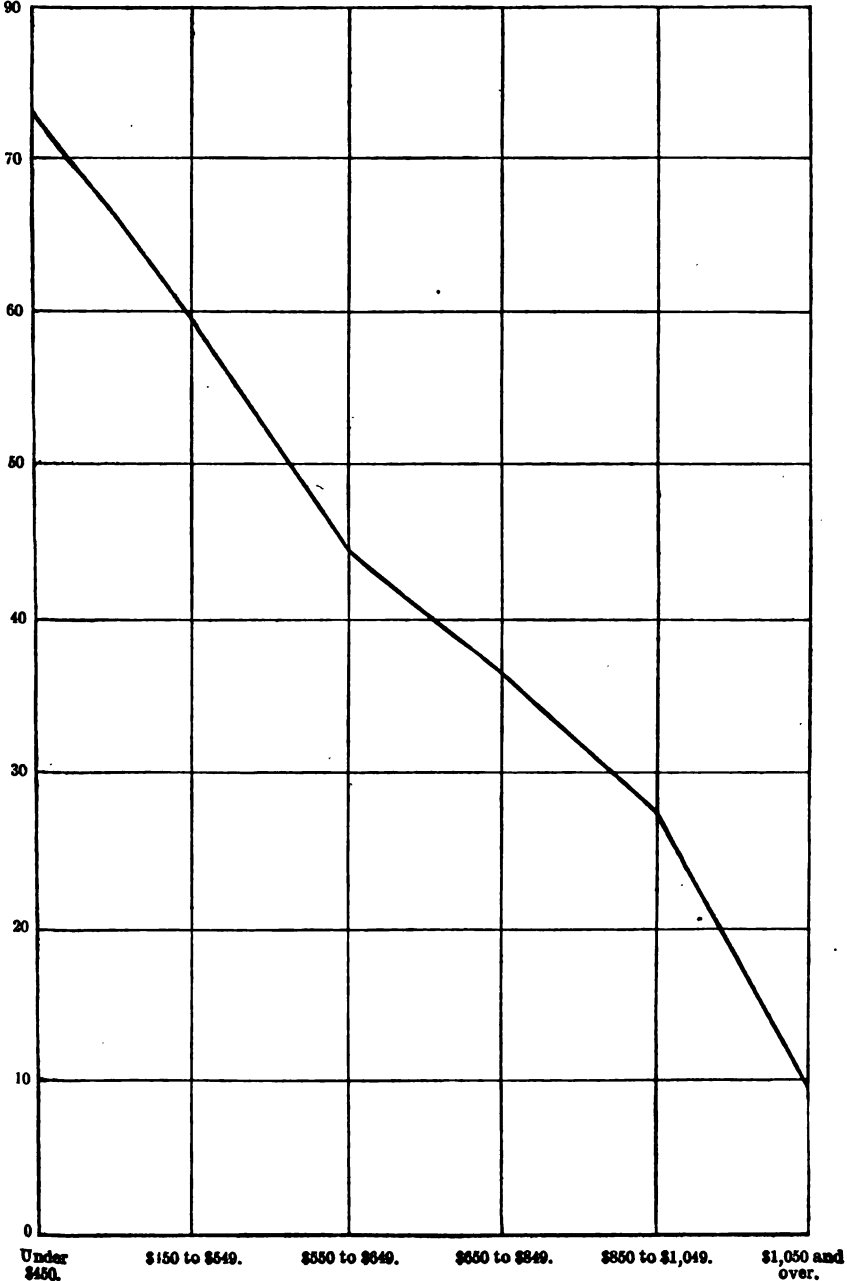
<sup>1</sup> Includes stillbirths.<sup>2</sup> Includes 1 father living on his income.

From the figures just presented it may not be possible to determine exactly the yearly earnings that a man must have in order to maintain his family unaided, but the fact that the majority of all mothers in the group where the father's earnings fall below \$650 were gainfully

employed at some time during the year following childbirth shows a significant relation between the gainful employment of mothers and the low earnings of fathers.

DIAGRAM VII.—PER CENT OF MOTHERS GAINFULLY EMPLOYED DURING YEAR FOLLOWING BABY'S BIRTH WHEN FATHERS EARNED SPECIFIED AMOUNTS.

PER CENT.



**Mother's earnings.**—Mother's earnings were tabulated separately from income from other sources and they were found to be relatively small; in more than half of the instances they amounted to less than \$250 per mother. There were 722 babies, live born and stillborn, or 43.9 per cent of the whole number, whose mothers were gainfully employed at some time during the year following their birth. More than one-third of the working mothers earned under \$150 during the year and only 3.5 per cent of them earned as much as \$550. A considerably larger proportion of the foreign-born mothers than of the native mothers earned more than \$250. These contributions were not all net gain to the family, however, even when derived from other work than keeping boarders and lodgers, for when the mother worked out it sometimes became necessary to hire a caretaker for the baby or to incur other extra expense in housekeeping.

TABLE 29.

Earnings of mother during year following baby's birth.	Births during selected year to gainfully employed mothers.					
	Total.		Native.		Foreign-born.	
	Number.	Per cent distribution.	Number.	Per cent distribution.	Number.	Per cent distribution.
All classes.....	722	100.0	167	100.0	555	100.0
Under \$150.....	263	36.4	65	38.9	198	35.7
\$150 to \$249.....	148	20.5	41	24.6	107	19.3
\$250 to \$349.....	119	16.5	25	15.0	94	16.9
\$350 to \$549.....	127	17.6	19	11.4	108	19.5
\$550 and over.....	25	3.5	4	2.4	21	3.8
Not reported.....	40	5.5	13	7.8	27	4.9

**Work during year before baby's birth.**—Nearly half the whole number of babies included in the investigation had mothers who had engaged in gainful employment at some time during the year previous to the baby's birth. The occupations included 504 cases where the work was away from home, 427 of which were of employment in the textile mills and 47 in other factories.

TABLE 30.

TABLE 30.  Occupation of mother during year before baby's birth.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Not gainfully employed.....	864	829	111	133.9	35	4.1
Gainfully employed.....	776	733	146	199.2	43	5.5
At home.....	272	267	40	149.8	5	1.8
Keeping lodgers.....	239	234	36	153.8	5	2.1
Other home work.....	33	33	4	.....	.....	.....
Away from home.....	504	466	106	227.5	38	7.5
Textile mill operatives.....	427	395	95	240.5	32	7.5
Other factory operatives.....	47	43	6	.....	4	.....
Clerks and saleswomen.....	11	10	1	.....	1	.....
Servants.....	12	11	4	.....	1	.....
Other occupations.....	7	7	.....	.....	.....	.....
Not reported.....	3	2	1	.....	1	.....

<sup>1</sup> Not shown where base is less than 100.



Babies of mothers gainfully employed during the year preceding the baby's birth had a mortality rate of 199.2, whereas the rate for babies of mothers who were not so employed was 133.9. The rate for babies of mothers whose gainful work was in the home was 149.8; for babies whose mothers worked away from home, 227.5. This latter rate is somewhat lower than the rate of 242.9 reported for babies in the lowest economic class—those whose fathers earned under \$450 per annum. However, the total number of live-born babies whose mothers worked during the year previous to childbirth was 733, while the number whose fathers earned under \$450 was only 210. In order to compare groups containing the largest possible number of coincidences between low earnings and mother's work it is necessary to consider all live-born babies whose fathers' earnings were under \$650 per annum. These babies numbered 750, and the infant mortality rate was 193.3, which is appreciably lower than the one quoted above for babies whose mothers were gainfully employed away from home the year previous to childbirth. The influence upon stillbirths of mother's work before the birth of her child has been shown already in the discussion of that topic on page 31.

TABLE 31.

Employment of mother at home and away from home during year before baby's birth and nativity of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Percent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Not gainfully employed.....	864	829	111	133.9	35	4.1
Gainfully employed.....	776	733	146	199.2	43	5.5
At home.....	272	267	40	149.8	5	1.8
Away from home.....	504	466	106	227.5	38	7.5
Not reported.....	3	2	1	.....	1	.....
Native mothers.....	548	523	67	128.1	25	4.6
Not gainfully employed.....	352	338	31	91.7	14	4.0
Gainfully employed.....	194	183	35	191.3	11	5.7
At home.....	58	58	7	.....	.....	.....
Away from home.....	136	125	28	224.0	11	8.1
Not reported.....	2	2	1	.....	.....	.....
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Not gainfully employed.....	512	491	80	162.9	21	4.1
Gainfully employed.....	582	550	111	201.8	32	5.5
At home.....	214	209	33	157.9	5	2.3
Away from home.....	368	341	78	228.7	27	7.3
Not reported.....	1	.....	.....	.....	1	.....
French-Canadian mothers.....	610	574	129	224.7	36	5.9
Not gainfully employed.....	349	335	66	197.0	14	4.0
Gainfully employed.....	261	239	63	263.6	22	8.4
At home.....	75	73	14	.....	2	.....
Away from home.....	186	166	49	296.2	20	10.8
Other foreign-born mothers.....	485	467	62	132.8	18	3.7
Not gainfully employed.....	163	156	14	89.7	7	4.3
Gainfully employed.....	321	311	48	154.3	10	3.1
At home.....	139	136	19	139.7	3	2.2
Away from home.....	182	175	29	165.7	7	3.8
Not reported.....	1	.....	.....	.....	1	.....

<sup>1</sup> Not shown where base is less than 100.

**Work during year after baby's birth.**—It remains to be demonstrated whether or not the gainful employment of the mother during some part of the year following childbirth is an independent factor in the infant mortality rate. The mothers of 679 live-born infants were thus employed; among these infants occurred 150 deaths under 12 months of age. The infant mortality rate, therefore, for this group is 220.9 as compared with a rate of 122 for the babies whose mothers were not gainfully employed during any part of the year following childbirth. At first glance the wide difference between these rates seems conclusive evidence of the effect of the mother's gainful employment upon the well-being of the child. Several points, however, which weaken the comparative value of these rates must be considered.

In the first place, the group of gainfully employed mothers is composed of two widely different elements—those who worked at home and were not separated from their babies and those who worked away from home and were separated from their babies. Secondly, the mothers of 72 babies were not gainfully employed until after their babies had died. In no way, therefore, could the employment of these mothers have been a factor in their babies' deaths.

TABLE 32.

Employment of mother at home and away from home during year following baby's birth and baby's age when mother resumed gainful work away from home.	Live births during selected year and infant deaths.			
	Total live births.	Survived 1 year.	Infant deaths.	
			Number.	Infant mortality rate. <sup>1</sup>
All mothers.....	1,564	1,306	258	165.0
Not gainfully employed.....	885	777	106	122.0
Gainfully employed.....	679	529	150	220.9
Resumed after baby's death.....	72	.....	72	.....
Resumed during baby's life.....	603	529	74	122.7
No report of time resumed.....	4	.....	4	.....
Work at home.....	353	305	48	136.0
Resumed after baby's death.....	13	.....	13	.....
Resumed during baby's life.....	336	305	31	92.3
No report of time resumed.....	4	.....	4	.....
Work away from home.....	326	224	102	312.9
Resumed after baby's death.....	59	.....	59	.....
Resumed during baby's life.....	267	224	43	161.0
Baby's age when resumed:				
Under 1 month.....	11	6	5	.....
1 month and under 2.....	34	22	12	.....
2 months and under 3.....	42	37	5	.....
3 months and under 4.....	32	21	11	.....
4 months and under 5.....	22	18	4	.....
5 months and under 6.....	31	28	3	.....
6 months or older.....	96	92	3	.....

<sup>1</sup> Not shown where base is less than 100.

If the 72 babies just referred to and the 4 whose ages when the mothers resumed work were not reported be eliminated from consideration, the infant mortality rate for the 603 babies whose mothers were gainfully employed while their babies were still alive is 122.7—a rate

almost identical with that for babies whose mothers were not gainfully employed.

The rate of 122.7 is made up of two rates—one of 92.3 for the babies whose mothers were gainfully employed at home during the baby's lifetime and one of 161 for those whose mothers were thus employed away from home. Evidently employment of the latter sort is the one, if either, to be considered a factor in infant mortality.

A careful examination of the original schedules discloses the fact that of the mothers who were gainfully employed outside the home while their babies were still alive not one was thus employed before the baby was at least 2 weeks old. The mortality rate, 161 for the babies of these mothers, is therefore a rate for a selected group of babies who survived at least 2 weeks and should be compared with the rate for the remaining babies who survived at least 2 weeks. In all, 1,508 infants survived at least 2 weeks—267 whose mothers went out to work while their babies were alive and 1,241 others. In this latter group occurred 159 subsequent infant deaths—a mortality rate of 128.1, which is markedly lower than the rate of 161 for the babies whose mothers were gainfully employed outside the home during the baby's lifetime.

**Significance of mother's absence.**—The evil effects of the mother's gainful employment away from home while the baby is alive lie primarily in depriving the child of the mother's care and in substituting artificial feeding for breast feeding. The younger the baby the more marked the effect. Of the 119 babies whose mothers worked away from home before the baby was 4 months of age, 33 died before the age of 1 year. The mortality rate was 277.3. Among all other live-born babies, 1,445 in number, there occurred 225 infant deaths—a mortality rate of 155.7. But since the 119 babies were part of a selected group which had survived at least 2 weeks, the full significance of the rate, 277.3, appears only when contrasted with the rate of 121.7 for the remainder of the group, namely, 1,389 babies who had survived at least 2 weeks. (See Table 33.)

Clearly, from these comparisons, so far as our data revealed the actual conditions in Manchester, the gainful employment of mothers away from home during some part of the year following childbirth was accompanied by a marked increase in the infant mortality rate, particularly in those cases where the mothers were thus employed within four months of childbirth.

TABLE 33.

Baby's age when mother resumed gainful work.	Infants whose mothers resumed work away from home during baby's life-time.		
	Total.	Infant deaths.	
		Number.	Infant mortality rate. <sup>1</sup>
All ages .....	267	43	161.0
Under 4 months .....	119	33	277.3
Under 1 month .....	11	5	.....
1 month and under 2 .....	34	12	.....
2 months and under 3 .....	42	5	.....
3 months and under 4 .....	32	11	.....
4 months or older .....	148	10	67.6
4 months and under 5 .....	22	4	.....
5 months and under 6 .....	31	3	.....
6 months or older .....	95	3	.....

<sup>1</sup> Not shown where base is less than 100.

**Mother's work and infant mortality in low-earnings group.**—The gainful employment of mothers, as has been shown, is closely connected in Manchester with the inadequate earnings of the father, and the high infant mortality rate among babies of employed mothers may be due to the low economic status of the family. In order, therefore, to separate the effects of the one condition from the effects of the other, the data concerning the employment of mothers in the group where the father's earnings were under \$650 have been brought together in the following table.

TABLE 34.

Employment of mother during year following baby's birth, where father's earnings were under \$650.	Live births.	Infant deaths.	
		Number.	Infant mortality rate. <sup>1</sup>
All mothers .....	750	145	193.3
Mothers not gainfully employed .....	322	43	133.5
Mothers gainfully employed .....	428	102	238.3
After baby's death .....	46	46	.....
During baby's life .....	378	52	137.6
At home .....	181	21	116.0
Away from home .....	197	31	157.4
Time of resumption not specified .....	4	4	.....

<sup>1</sup> Not shown where base is less than 100.

From this table emerges the significant fact that within the same low-income group the babies whose mothers were gainfully employed away from home while their babies were alive had a notably higher infant mortality rate than those babies whose mothers were not gainfully employed during any part of the year following childbirth.

## NATIVITY AND NATIONALITY.

**Foreign element in city.**—Manchester has a large foreign-born population in which the French-Canadian is the dominant group. The total population in 1910 according to the Federal census was 70,063, of which 29,692, or 42 per cent, were foreign-born white; 24,197, or 35 per cent, native white of foreign or mixed parentage, and only 16,119, or 23 per cent, native white of native parents. The French-Canadian was not far below the native stock, numbering 13,720, or 20 per cent of the total. Other foreign born found in any considerable numbers in 1910 were the Irish, 3,482; Canadians (other than French), 2,716; Germans, 1,225; and Greeks, 1,330. The last named and the Poles and Syrians are the newest immigrants and appear to be coming in increasing numbers.

The reports<sup>1</sup> of the Immigration Commission give the following account of the history of immigration to Manchester:

The character of the immigration to Manchester, N. H., like that of other cotton-manufacturing cities, has undergone considerable change within the past 20 years. Practically no Irish have come during that time, the English and Germans ceased to come in considerable numbers during the same period, and comparatively few French Canadians have arrived since the cessation of their enormous immigration 10 or 15 years ago.

The Irish immigration was very heavy after 1850 and again after 1870. They form at present by far the largest group of foreign-born, exclusive of Canadians. \* \* \* French-Canadian immigration, beginning in large numbers in the late seventies and in the early part of the decade 1880-1890, has contributed by far the most important element of the foreign population. In 1900, 55 per cent of the foreign-born of Manchester were French Canadians, their number, even exclusive of the second generation, representing almost one-fourth of the total population of the city. \* \* \*

The more recent immigrants, at present so important a factor in the mill population, began coming to Manchester 12 or 15 years ago. The Poles first entered the mills of the city about 1895, and are still arriving in considerable numbers. The Greeks and Bulgarians, together with a few Syrians and Turks, constitute the largest racial group now coming to the city.

**Foreign-born mothers in this study.**—Although the foreign born constituted only about 42 per cent of the total population, foreign-born mothers gave birth to about 67 per cent of the 1,643 infants.

Over half of the mothers of foreign birth were French Canadians. The number of births to this group was 610, or 37.1 per cent of the total. Polish mothers were next in numbers, giving birth to 170 children. Irish mothers contributed 92 births; Greek and Syrian, 72.

The last two races named live in the same colonies and have much the same habits; therefore they were combined for purposes of comparison. The same is true also of Ruthenian, Lithuanian, and Polish, and the number of births to this whole group was 192. English, Irish, and Scotch combined contributed 115 births. Other nationalities were less important in numbers. (See Table 15.)

<sup>1</sup> Reports of the Immigration Commission, vol. 10, p. 46, Washington, 1911.

**French Canadians.**—The French Canadians in Manchester form a prominent and distinct element in the city life. They have an intense feeling of nationality, shared even by their descendants of the first and second generations. Their impress upon the city is to be seen in the French names of many institutions, such as churches, convents, schools, hospitals, orphanages, and homes. Many of the streets in the predominantly French section bear French names, as, for example, Notre Dame, Cartier, Dubuque, Youville, Alsace, etc. French is the common language of the home, shop, and street in this section, and even the stores in the principal business sections employ French interpreters to receive customers' orders. There is one French daily newspaper in the city. It is significant that the only native mothers encountered in connection with this study who could not speak English were of French-Canadian descent; they numbered 42, or 7.7 per cent of the total native born.

The French Canadians in Manchester are generally thrifty, self-respecting people, ambitious to own their homes and to accumulate property. Despite their tendency to retain their language and a separate community life, they are found not only in the French quarter but in other sections of the city. They are also found in all occupations, though large numbers work in the textile mills. Their earnings here are higher as a rule than those of the newer immigrants, the Greeks, Syrians, and Poles, and on the whole they occupy a relatively favorable position among the foreign-born population in the community as regards both economic and social status.

**Nationality and infant mortality.**—The infant mortality rate among babies of native mothers was 128.1, while among babies of foreign-born mothers it was 183.5. The rate for babies born to French-Canadian mothers was 224.7, and the next highest rate was that among babies of Polish mothers—189. The lowest rate shown is that for babies of the English, Irish, and Scotch mothers; for this group it was only 66, a rate very much lower than that for babies of native mothers. These figures make apparent the disproportionately large number of deaths among babies born to French-Canadian mothers. There were 129 deaths in this group, and if these be eliminated the infant mortality rate for all other foreign-nationality groups combined falls from 183.5 to 132.8, and the rate for all babies considered from 165 to 130.3. (See Table 15.)

**Economic status and size of family.**—A larger proportion of the foreign-born mothers than of the native are found in the economic groups where father's earnings are lowest, and this difference in economic status is even more marked when the size of family is considered. In general the native born have larger earnings and smaller families than the foreign born. In the group of babies in which the fathers earned under \$650, of those with native mothers 15 per cent were in families of over four persons, while of babies with other foreign

mothers 28.4 per cent and of babies with French-Canadian mothers 42.5 per cent, were in such families. Similarly, among all with fathers earning under \$850 the percentages of the same three groups in families of more than four persons were 19.7, 30.8, and 41, respectively. Only 11 babies of native mothers were born in families of more than eight persons and two of these were in the earnings group under \$650. Of the babies born to foreign mothers 74 were in families of over eight persons, and 44 of these were in this low-income group.

TABLE 35.

Earnings of father and nativity of mother.	Average number <sup>1</sup> of persons per family.	Births during selected year in—					
		All families.	Families of specified number <sup>1</sup> of persons.				No report.
			1 to 4.		Over 4.		
			Num-ber.	Per-cent.	Num-ber.	Per-cent.	
All mothers.....	4.0	1,643	1,132	68.9	510	31.0	1
Under \$450.....	3.8	225	163	72.4	62	27.6	
\$450 to \$549.....	4.2	274	183	66.8	91	33.2	
\$550 to \$649.....	3.9	297	205	69.0	92	31.0	
\$650 to \$849.....	4.1	426	283	66.4	143	33.6	
\$850 to \$1,049.....	3.9	199	144	72.4	55	27.6	
\$1,050 to \$1,249.....	4.2	72	48	66.7	24	33.3	
\$1,250 and over.....	3.6	105	78	74.3	27	25.7	
No earnings <sup>2</sup> .....	3.6	24	16	66.7	7	29.2	1
Not reported.....	4.2	21	12	57.1	9	42.9	
Native mothers.....	3.3	548	444	81.0	103	18.8	1
Under \$450.....	3.4	29	24	82.8	5	17.2	
\$450 to \$549.....	3.2	59	51	86.4	8	13.6	
\$550 to \$649.....	3.1	92	78	84.8	14	15.2	
\$650 to \$849.....	3.7	180	120	75.0	40	25.0	
\$850 to \$1,049.....	3.3	100	83	83.0	17	17.0	
\$1,050 to \$1,249.....	3.3	36	30	83.3	6	16.7	
\$1,250 and over.....	3.2	63	52	82.5	11	17.5	
No earnings <sup>2</sup> .....	1.0	5	4	80.0			1
Not reported.....	3.8	4	2	50.0	2	50.0	
Foreign-born mothers.....	4.3	1,095	688	62.8	407	37.2	
Under \$450.....	3.8	196	139	70.9	57	29.1	
\$450 to \$549.....	4.5	215	132	61.4	83	38.6	
\$550 to \$649.....	4.3	205	127	62.0	78	38.0	
\$650 to \$849.....	4.4	266	163	61.3	103	38.7	
\$850 to \$1,049.....	4.5	99	61	61.6	38	38.4	
\$1,050 to \$1,249.....	5.1	36	18	50.0	18	50.0	
\$1,250 and over.....	4.1	42	26	61.9	16	38.1	
No earnings <sup>2</sup> .....	4.2	19	12	63.2	7	36.8	
Not reported.....	4.3	17	10	58.8	7	41.2	
French-Canadian mothers.....	4.6	610	355	58.2	255	41.8	
Under \$450.....	4.3	52	32	61.5	20	38.5	
\$450 to \$549.....	5.0	121	65	53.7	56	46.3	
\$550 to \$649.....	4.6	133	79	59.4	54	40.6	
\$650 to \$849.....	4.4	177	109	61.6	68	38.4	
\$850 to \$1,049.....	4.8	68	39	57.4	29	42.6	
\$1,050 to \$1,249.....	6.0	18	6	33.3	12	66.7	
\$1,250 and over.....	4.4	22	13	59.1	9	40.9	
No earnings <sup>2</sup> .....	3.4	10	7	70.0	3	30.0	
Not reported.....	4.7	9	5	55.6	4	44.4	
Other foreign-born mothers.....	3.9	485	333	68.7	152	31.3	
Under \$450.....	3.7	144	107	74.3	37	25.7	
\$450 to \$549.....	3.8	94	67	71.3	27	28.7	
\$550 to \$649.....	3.9	72	48	66.7	24	33.3	
\$650 to \$849.....	4.4	89	54	60.7	35	39.3	
\$850 to \$1,049.....	3.9	31	22	71.0	9	29.0	
\$1,050 to \$1,249.....	4.2	18	12	66.7	6	33.3	
\$1,250 and over.....	3.8	20	13	65.0	7	35.0	
No earnings <sup>2</sup> .....	5.0	9	5	55.6	4	44.4	
Not reported.....	3.9	8	5	62.5	3	37.5	

<sup>1</sup> Baby born during selected year not included in number.

<sup>2</sup> Includes 1 father living on his income.

**Economic status of French Canadians and others.**—The high infant mortality rates found among foreign born are accompanied in general by low earnings of the father. Among the French Canadians, however, the father's earnings were in general higher than among other foreign born. For example, of the births to French-Canadian mothers only 8.5 per cent occurred in the economic class where the father's earnings were less than \$450, while of the births to other foreign mothers 29.7 per cent were in this class. Half of the babies of French-Canadian mothers belonged to families where the father's earnings were less than \$650, but practically two-thirds of the babies of other foreign-born mothers belonged to such families. The infant death rates among both the French Canadians and the other foreign born show in general a decline with rise in father's earnings, but the death rates for the babies of French-Canadian mothers within each economic class are higher than the rates for others in the same class.

**Employment of foreign-born mothers.**—A classification of the babies born to French-Canadian mothers and to other foreign-born mothers on the basis of gainful employment of the mother the year after childbirth and according to father's earnings reveals a smaller extent of gainful employment among French-Canadian mothers. Of the whole number of babies of French-Canadian mothers, 41.5 per cent had mothers who worked the year following childbirth as compared with 62.3 per cent of the babies of other foreign mothers who worked during this period. In the lowest economic class, where the father's earnings were less than \$450 per annum, the percentage of babies whose mothers worked the year following childbirth was 55.8 in the French-Canadian group and 83.3 in the group of other foreign-born. Though the proportion of mothers gainfully employed declines in both groups, generally with the rise of father's earnings the proportion of mothers who work is less among the French Canadians than among the other foreign born. (See Table 28.)

Gainful employment of the mothers during the year preceding childbirth is also found to a less extent among the French-Canadian mothers. Of the births to French-Canadian mothers 42.8 per cent were to mothers who had worked the year previous to confinement, while 66.2 per cent of the births to other foreign-born mothers were to mothers who had worked in this year. (See Table 31.)

The infant mortality rate, as has been shown, in general is higher among babies of mothers gainfully employed than among babies of mothers not so employed. The contrast between those whose mothers work away from home and others is particularly marked, but in all cases the babies of French-Canadian mothers die at a much higher rate than babies of other foreign-born mothers.



Despite then the smaller extent of gainful employment among the French-Canadian mothers and the higher economic status of the families, counterbalanced in part, it is true, by the larger size, infant death rates in all subclasses compared are so much higher among babies of French-Canadian mothers than among babies of other foreign-born mothers that a much higher rate for the French-Canadian group as a whole is obtained.

**Ability to speak English.**—Among the foreign born inability to speak English is generally regarded as a handicap which puts them at a disadvantage economically and socially and so tends toward a lower standard of living. It usually indicates a lack of means for securing knowledge of the proper care of the baby and of the medical resources of the community as a whole, in that the non-English speaking are more or less limited in their choice of doctors and nurses and of other social, medical, and educational resources of the community. But these conditions do not operate equally regardless of nationality; in Manchester lack of a knowledge of English would be naturally less disadvantageous to the French Canadians than to others, as the former are such a definitely independent element in the population.

TABLE 36.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
Ability of mother to speak English.						
All mothers.....	1,643	1,564	258	165.0	79	4.8
Able to speak English.....	975	922	126	136.7	53	5.4
Unable to speak English <sup>2</sup> .....	667	641	132	206.9	26	3.9
Not reported.....	1	1				
Foreign-born mothers.....	1,096	1,041	191	183.5	54	4.9
English-speaking nationalities <sup>3</sup> .....	129	120	9	75.0	9	7.0
Non-English speaking nationalities.....	966	921	182	197.6	45	4.7
Able to speak English.....	341	321	60	186.9	20	5.9
Unable to speak English.....	625	600	122	203.3	25	4.0
French-Canadian mothers.....	610	574	129	224.7	36	5.9
Able to speak English.....	249	231	50	216.5	18	7.2
Unable to speak English.....	361	343	79	230.3	18	5.0
Other foreign-born mothers.....	356	347	53	152.7	9	2.5
Able to speak English.....	92	90	10		2	
Unable to speak English.....	264	257	43	167.3	7	2.7

<sup>1</sup> Not shown where base is less than 100.

<sup>2</sup> Includes 42 native mothers.

<sup>3</sup> English, Irish, Scotch, and Canadian except French.

A classification of foreign-born mothers of non-English speaking nationalities according to ability to speak English reveals the fact

that the French-Canadian mothers, who are longer resident in this country than other foreign-born mothers, had acquired the language to a greater degree than the others. Of the 610 babies born to French-Canadian mothers 249, or 40.8 per cent, had mothers able to speak English, while of the babies of other non-English speaking foreign-born mothers but 92, or 25.8 per cent, had such mothers. Forty-two native mothers spoke French only.

The rate among babies of all mothers (native and foreign-born) able to speak English was 136.7, while that of babies whose mothers could not speak the language was 205.9. The infant death rate for babies of both French-Canadian and other non-English speaking foreign-born mothers was higher where the mother could not speak English than where she could.

**Years in United States.**—The infant death rate for babies of all foreign-born mothers who had been in this country 5 years or less was 248.8, while that for babies of mothers who had lived here over 5 years was 165.7. On the other hand, the French-Canadian, among whom the highest infant death rate was found, was the foreign group which had been in this country longest. Only 14.9 per cent of all babies of French-Canadian mothers were born to those who had lived in the United States 5 years or less; whereas 27.5 per cent of babies of other foreign-born mothers were born to those who had lived in the United States for that period. Nearly half of the French-Canadian mothers had been in this country over 15 years. The infant death rate was higher, however, among the more recently arrived French Canadians than among those who had been in the United States for 12 years or more.

TABLE 37.

TABLE 37.		Births during selected year to foreign-born mothers and infant deaths.					
Years in the United States.		Total births.	Live births.		Stillbirths.		
			Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
				Number.	Infant mortality rate. <sup>1</sup>		
All foreign-born mothers.....		1,085	1,041	191	183.5	54	4.9
Less than 3 years.....		44	43	9	•	1	•
3 to 5 years.....		180	174	45	258.6	6	3.3
6 to 8 years.....		165	160	24	150.0	5	3.0
9 to 11 years.....		138	132	29	219.7	6	4.3
12 to 15 years.....		183	176	24	136.4	7	3.8
16 years and more.....		381	353	59	167.1	28	7.3
Not reported.....		4	3	1	•	1	•
French-Canadian mothers.....		610	574	129	224.7	36	5.9
Less than 3 years.....		14	13	5	•	1	•
3 to 5 years.....		77	74	24	•	3	•
6 to 8 years.....		68	65	14	•	3	•
9 to 11 years.....		55	52	16	•	3	•
12 to 15 years.....		108	103	19	184.5	5	4.6
16 years and more.....		285	265	50	188.7	20	7.0
Not reported.....		3	2	1	•	1	•
Other foreign-born mothers.....		485	467	62	132.8	18	3.7
Less than 3 years.....		30	30	4	•	•	•
3 to 5 years.....		103	100	21	210.0	3	2.9
6 to 8 years.....		97	95	10	•	2	•
9 to 11 years.....		83	80	13	•	3	•
12 to 15 years.....		75	73	5	•	2	•
16 years and more.....		96	88	9	•	8	•
Not reported.....		1	1	•	•	•	•

<sup>1</sup> Not shown where base is less than 100.

TABLE 28.

TABLE 28.  Nationality of mother.	Births during selected year to foreign-born mothers.							
	Total.	In United States specified number of years.						
		Under 3.	3 to 5.	6 to 8.	9 to 11.	12 to 15.	16 and over.	Not reported.
All foreign-born mothers.....	1,086	44	180	165	138	183	381	4
Canadian, French.....	610	14	77	68	55	108	285	3
Polish.....	170	7	41	51	39	24	8	.....
English, Irish, and Scotch.....	115	1	7	11	17	27	52	.....
Greek and Syrian.....	72	14	37	12	8	1	.....	.....
All other.....	127	8	18	23	19	23	35	1
Not reported.....	1	.....	.....	.....	.....	.....	1	.....

PER CENT DISTRIBUTION.

All foreign-born mothers.....	100.0	4.0	16.4	15.1	12.6	16.7	34.8	0.4
Canadian, French.....	100.0	2.3	12.6	11.1	9.0	17.7	46.7	•5
Polish.....	100.0	4.1	24.1	30.0	22.9	14.1	4.7	•
English, Irish, and Scotch.....	100.0	•9	6.1	9.6	14.8	23.5	45.2	•
Greek and Syrian.....	100.0	19.4	51.4	16.7	11.1	1.4	•	•
All other.....	100.0	6.3	14.2	18.1	15.0	18.1	27.6	•8

**Literacy.**—Literacy in Manchester showed almost as close a relation to foreign birth as ability to speak English, for out of a total of 286 babies born to mothers who were illiterate only 25 were babies of native mothers. In the case of literacy again a peculiar situation exists with reference to the French Canadians, for although illiteracy in general is accompanied by a high infant death rate, in the French-Canadian group the infant death rate for all babies was 224.7, and for babies of literate mothers the rate was practically identical, namely 223.3. The difference in the infant mortality rates on the basis of the literacy of mothers was chiefly confined to the group of other foreign born. Here the rate was only 94.6 for babies of literate mothers but rose to 198.8 for babies of illiterate mothers. The French-Canadian mothers were more generally literate than the other foreign-born mothers, 85.9 per cent being so classed as compared with 63.9 per cent of the other foreign born.

TABLE 39.

Literacy <sup>1</sup> of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>2</sup>
			Number.	Infant mortality rate. <sup>3</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Literate.....	1,355	1,291	200	154.9	64	4.7
Illiterate <sup>1</sup> .....	286	271	58	214.0	15	5.2
Not reported.....	2	2	.....	.....	.....	.....
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Literate.....	834	793	139	175.3	41	4.9
Illiterate.....	261	248	52	209.7	13	5.0
French-Canadian mothers.....	610	574	129	224.7	36	5.9
Literate.....	524	497	111	223.3	27	5.2
Illiterate.....	86	77	18	.....	9	.....
Other foreign-born mothers.....	485	467	62	132.8	18	3.7
Literate.....	310	296	28	94.6	14	4.5
Illiterate.....	175	171	34	198.8	4	2.3

<sup>1</sup> Persons who can read and write in any language are reported literate.

<sup>2</sup> Not shown where base is less than 100.

<sup>3</sup> Includes 25 native mothers.

**Conditions peculiar to French Canadians.**—Since those conditions which have been shown to be factors in a high infant mortality rate exist to practically no greater extent among the French Canadians than among the other groups, the reasons for the excessive infant mortality rate among the babies of French-Canadian mothers must be sought, perhaps, in conditions of living that are peculiar to this group.

Lack of Americanization—that is, retention of a foreign language and maintenance of such distinct channels of expression as separate schools, churches, orphanages, political and pleasure clubs, as well as a daily paper printed in a foreign language—may tend to narrow and limit that opportunity for contact which might have an educational value along hygienic and other lines. But this question was not pursued far enough to justify any positive conclusion as to its importance in retarding the development of the French Canadians. In any case these social conditions would affect the baby largely as they modified customs within the home itself.

In their method of feeding and in the size of their families the French Canadians show distinctive conditions which may account partly for the difference between their infant mortality rate and the rates of other groups of foreign born.

#### FEEDING.

**Feeding and infant mortality.**—Method of feeding is among the factors immediately related to infant mortality. Feeding is often the primary means through which the less direct factors, such as employment of mothers away from home and low income with insufficient food and rest for the mother, exert their influence. The mother's intelligence and care are also reflected in the baby's feeding, although the mother's ignorance is itself often but the consequence of low economic status and early entrance into gainful employment. The importance of feeding to infant welfare is universally acknowledged, and authorities are also agreed in emphasizing the great superiority of breast feeding to any substitute for mother's milk.

Of the 1,643 babies included in this report, 1,564 were live born, and of this number 1,535 survived long enough to be fed. Upon this latter group, then, the study of feeding is based. Only the first nine months were taken into account in the study of feeding, because as a rule breast feeding after that period is not necessary to the baby's welfare.

**Effects of feeding in each month of age.**—The chances of survival for babies deprived of breast milk at an early age are decidedly less than those for babies nursed for a longer period. A comparison of the babies being breast fed and those being artificially fed any month up to the ninth reveals the fact that the percentage who failed to survive infancy was from two to five times as high among babies being artificially fed as among those receiving breast milk exclusively. (See Table 40.)

TABLE 40.

Infants born during selected year and surviving at beginning of specified month.

Month of life and type of feeding.	All mothers.				Native mothers.				Foreign-born mothers.			
	Total.	Died in—		Specified month.	Total.	Died in—		Specified month.	Total.	Died in—		Specified month.
		First year.	Per cent.			First year.	Per cent.			First year.	Per cent.	
First month.....	1,564	258	16.5	72	523	67	12.8	16	1,041	191	18.3	56
Breast exclusively.....	1,238	148	12.0	26	420	38	9.0	6	818	110	13.4	20
Mixed.....	57	15	26.3	3	15	1	6.7	.....	42	14	33.3	3
Artificial exclusively.....	238	66	27.7	14	82	22	26.8	4	156	44	28.2	10
Not fed, died at once.....	29	29	.....	29	6	6	.....	6	23	23	.....	23
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Second month.....	1,492	186	12.5	24	507	51	10.1	4	985	135	13.7	20
Breast exclusively.....	1,067	92	8.6	12	353	22	6.2	1	714	70	9.8	11
Mixed.....	90	18	20.0	2	25	1	4.0	.....	65	17	26.2	2
Artificial exclusively.....	333	76	22.8	10	129	28	21.7	3	204	48	23.5	7
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Third month.....	1,468	162	11.0	24	503	47	9.3	4	965	115	11.9	20
Breast exclusively.....	910	53	5.8	9	305	14	4.6	1	605	39	6.4	8
Mixed.....	129	24	18.6	4	33	3	9.1	.....	96	21	21.9	4
Artificial exclusively.....	427	85	19.9	11	165	30	18.2	3	262	55	21.0	8
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Fourth month.....	1,444	138	9.6	18	499	43	8.6	7	945	95	10.1	11
Breast exclusively.....	742	31	4.2	6	250	7	2.8	3	492	24	4.9	3
Mixed.....	184	21	11.4	2	48	5	10.4	.....	136	16	11.8	2
Artificial exclusively.....	516	86	16.7	10	201	31	15.4	4	315	55	17.5	6
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Fifth month.....	1,426	120	8.4	18	492	36	7.3	5	934	84	9.0	13
Breast exclusively.....	633	17	2.7	.....	211	2	.9	.....	422	15	3.6	.....
Mixed.....	229	22	9.6	4	63	4	6.3	.....	166	18	10.8	4
Artificial exclusively.....	562	81	14.4	14	218	30	13.8	5	344	61	14.8	9
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Sixth month.....	1,408	102	7.2	21	487	31	6.4	10	921	71	7.7	11
Breast exclusively.....	523	14	2.7	3	174	1	.6	1	349	13	3.7	2
Mixed.....	281	20	7.1	5	81	4	4.9	3	200	16	8.0	2
Artificial exclusively.....	602	68	11.3	13	232	26	11.2	6	370	42	11.4	7
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Seventh month.....	1,387	81	5.8	18	477	21	4.4	5	910	60	6.6	13
Breast exclusively.....	386	10	2.6	1	125	.....	.....	.....	261	10	3.8	1
Mixed.....	354	14	4.0	2	107	.....	.....	.....	247	14	5.7	2
Artificial exclusively.....	645	57	8.8	15	245	21	8.6	5	400	36	9.0	10
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Eighth month.....	1,369	63	4.6	11	472	16	3.4	3	897	47	5.2	8
Breast exclusively.....	314	6	1.9	.....	98	.....	.....	.....	216	6	2.8	.....
Mixed.....	391	13	3.3	2	122	.....	.....	.....	269	13	4.8	2
Artificial exclusively.....	662	44	6.6	9	252	16	6.3	3	410	28	6.8	6
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Ninth month.....	1,358	52	3.8	20	469	13	2.8	6	889	39	4.4	14
Breast exclusively.....	247	5	2.0	1	79	.....	.....	.....	168	5	3.0	1
Mixed.....	410	9	2.2	3	129	.....	.....	.....	281	9	3.2	3
Artificial exclusively.....	699	38	5.4	16	261	13	5.0	6	438	25	5.7	10
Not reported.....	2	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....

The total number of babies who were breast fed exclusively during their first month was 1,238, and of these 12 per cent failed to survive till the end of the year. Among the 238 babies who were artificially

fed during this month, however, 27.7 per cent died before the end of the year. There were 1,492 babies who survived until the beginning of the second month; 1,067 of these were breast fed during this month and 333 received no breast milk whatever. In the former group only 8.6 per cent died before the end of the year, while in the latter group, babies being artificially fed during the second month, 22.8 per cent failed to survive infancy. The percentages of infant deaths for the two groups, according to feeding in the third month, were 5.8 and 19.9, respectively, and for the succeeding months similar differences in the proportion of infant deaths in each group appear. At the beginning of the ninth month there were 1,358 babies living, of whom 247 were nursed exclusively in this month and 699 were artificially fed. In the first group 2 per cent died before reaching 12 months, while 5.4 per cent of the second group failed to live to that age. The difference in rates here, of course, can not be attributed to the relative influence of breast and artificial feeding at 9 months. But effects of both types of feeding are cumulative, and at any period during infancy they show in the subsequent death rates among the survivors. Not only the feeding being given during any specified month but also the feeding during all or a part of the preceding months of the child's life cause the difference in death rates later.

The above comparisons are between breast feeding exclusively and artificial feeding exclusively during various periods of the first 9 months. The influence of mixed feeding—that is, part breast milk and part other food—upon the infant death rate is less pronounced. Babies whose feeding was mixed, in all groups compared, died in less numbers relatively than those being artificially fed and in greater numbers relatively than those being breast fed. In the early months exclusive breast feeding appears to be of most importance to a baby's welfare, for during this period the percentage of infant deaths among babies whose feeding is mixed more closely approaches that for babies being artificially fed than that for babies being exclusively breast fed. After the sixth month the reverse is practically true, and in the ninth month the advantage of exclusive breast feeding over mixed feeding, so far as it is indicated by the infant death rates, almost disappears.

A somewhat sharper contrast in the effects of feeding as indicated by death rates appears if we consider all babies alive at specified ages who had received a single type of feeding during their entire life up to that age. Of the infants alive at the end of 3 months only 4.9 per cent of those who had been breast fed up to that time died later under 1 year of age, while those who had been fed otherwise died at from more than two to nearly four times this rate. Of the infants who had been breast fed exclusively during the first 6 months of life only 2.1 per cent died under 1 year of age, as compared with per-

centages about six times as great for those who had had either mixed or artificial feeding during the same period. At the end of 9 months there were 244 infants who had had only breast milk and 177 who had never had it; 1.6 per cent of the first group and 3.4 per cent of the second subsequently died under 1 year of age.

TABLE 41.

Infants born during selected year and surviving at specified time.

Type of feeding, age of infant, and nativity of mother.	Died later in year.											
	Total.	Total.		In specified month of age.								
		Number.	Per cent.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.	Eleventh.	Twelfth.
ALL MOTHERS. <sup>1</sup>												
Type of feeding:												
At 3 months of age.....	1,442	138	9.6	18	18	21	18	11	20	11	9	12
Breast.....	901	44	4.9	6	2	11	7	2	4	2	4	6
Mixed.....	125	20	16.0	2	4	1	1	1	4	3	2	2
Artificial.....	416	74	17.8	10	12	9	10	8	12	6	3	4
During first 3 months.....	1,442	138	9.6	18	18	21	18	11	20	11	9	12
Breast exclusively.....	900	44	4.9	6	2	11	7	2	4	2	4	6
Mixed exclusively.....	41	5	12.2			1	1			1	1	1
Artificial exclusively.....	206	35	17.0	3	5	3	8	4	6	3	1	2
More than one type.....	295	54	18.3	9	10	7	2	5	10	5	3	3
At 6 months of age.....	1,385	81	5.8				18	11	20	11	9	12
Breast.....	520	11	2.1				1	1	1	1	3	4
Mixed.....	276	15	5.4				2	2	3	2	2	4
Artificial.....	589	55	9.3				15	8	16	8	4	4
During first 6 months.....	1,385	81	5.8				18	11	20	11	9	12
Breast exclusively.....	518	11	2.1				1	1	1	1	3	4
Mixed exclusively.....	31	4	12.9				4			1	1	1
Artificial exclusively.....	195	24	12.3				8	4	6	3	1	2
More than one type.....	641	42	6.6				8	6	13	6	4	5
At 9 months of age.....	1,336	32	2.4							11	9	12
Breast.....	246	4	1.6								2	2
Mixed.....	407	6	1.5							2		4
Artificial.....	683	22	3.2							9	7	6
During first 9 months.....	1,336	32	2.4							11	9	12
Breast exclusively.....	244	4	1.6								2	2
Mixed exclusively.....	25	2	8.0							1		1
Artificial exclusively.....	177	6	3.4							3	1	2
More than one type.....	890	20	2.2							7	6	7
NATIVE MOTHERS.												
Type of feeding:												
At 3 months of age.....	499	43	8.6	7	5	10	5	3	6	3	2	2
Breast.....	304	13	4.3	3	1	5	2			1	1	
Mixed.....	33	3	9.1			1				1	1	
Artificial.....	162	27	16.7	4	4	4	3	3	6	1		2
During first 3 months.....	499	43	8.6	7	5	10	5	3	6	3	2	2
Breast exclusively.....	304	13	4.3	3	1	5	2			1	1	
Mixed exclusively.....	10											
Artificial exclusively.....	74	14	18.9		3	2	2	1	4	1		1
More than one type.....	111	16	14.4	4	1	3	1	2	2	1	1	1
At 6 months of age.....	477	21	4.4				5	3	6	3	2	2
Breast.....	173											
Mixed.....	78	1	1.3								1	
Artificial.....	226	20	8.8				5	3	6	3	1	2
During first 6 months.....	477	21	4.4				5	3	6	3	2	2
Breast exclusively.....	173						5	3	6	3		
Mixed exclusively.....	6											
Artificial exclusively.....	69	9	13.0				2	1	4	1		1
More than one type.....	229	12	5.2				3	2	2	2	2	1
At 9 months of age.....	463	7	1.5							3	2	2
Breast.....	79											
Mixed.....	129											
Artificial.....	255	7	2.7							3	2	2
During first 9 months.....	463	7	1.5							3	2	2
Breast exclusively.....	78											
Mixed exclusively.....	6											
Artificial exclusively.....	62	2	3.2							1		1
More than one type.....	317	5	1.6							2	2	1

<sup>1</sup> Excluding 2 infants surviving 1 year for whom feeding was not reported.



TABLE 41—Continued.

Type of feeding, age of infant, and nativity of mother.		Infants born during selected year and surviving at specified time.												
		Died later in year.												
		Total.		In specified month of age.										
				Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.	Eleventh.	Twelfth.		
		Total.	Number.	Per cent.										
FOREIGN-BORN MOTHERS. <sup>1</sup>														
Type of feeding:														
At 3 months of age.....	943	95	10.1	11	13	11	13	8	14	8	7	10	6	
Breast.....	597	31	5.2	3	1	6	5	2	4	1	3	6	2	
Mixed.....	92	17	18.5	2	4	—	1	1	4	2	1	2	2	
Artificial.....	254	47	18.6	6	8	5	7	5	6	5	3	2	10	
During first 3 months.....	943	95	10.1	11	13	11	13	8	14	8	7	10	6	
Breast exclusively.....	596	31	5.2	3	1	6	5	2	4	1	3	6	2	
Mixed exclusively.....	31	5	16.1	—	1	—	1	—	—	1	1	1	1	
Artificial exclusively.....	132	21	15.9	3	2	1	6	3	2	2	1	1	1	
More than one type.....	184	38	20.7	5	9	4	1	3	8	4	2	2	10	
At 6 months of age.....	908	60	6.6	—	—	—	13	8	14	8	7	10	6	
Breast.....	347	11	3.2	—	—	—	1	1	1	1	3	4	2	
Mixed.....	196	14	7.1	—	—	—	2	2	3	2	1	4	2	
Artificial.....	363	35	9.6	—	—	—	10	5	10	5	3	2	10	
During first 6 months.....	908	60	6.6	—	—	—	13	8	14	8	7	10	6	
Breast exclusively.....	345	11	3.2	—	—	—	1	1	1	1	3	4	2	
Mixed exclusively.....	25	4	16.0	—	—	—	—	—	—	1	1	1	1	
Artificial exclusively.....	126	15	11.9	—	—	—	6	3	2	2	1	1	1	
More than one type.....	412	30	7.3	—	—	—	5	4	11	4	2	4	10	
At 9 months of age.....	873	25	2.9	—	—	—	—	—	—	8	7	10	6	
Breast.....	167	4	2.4	—	—	—	—	—	—	—	2	2	2	
Mixed.....	278	6	2.2	—	—	—	—	—	—	2	—	4	4	
Artificial.....	428	15	3.5	—	—	—	—	—	—	6	5	4	10	
During first 9 months.....	873	25	2.9	—	—	—	—	—	—	8	7	10	6	
Breast exclusively.....	166	4	2.4	—	—	—	—	—	—	—	2	2	2	
Mixed exclusively.....	19	2	10.5	—	—	—	—	—	—	1	—	1	1	
Artificial exclusively.....	115	4	3.5	—	—	—	—	—	—	2	1	1	1	
More than one type.....	573	15	2.6	—	—	—	—	—	—	5	4	6	10	
French-Canadian mothers.														
Type of feeding:														
At 3 months of age.....	511	66	12.9	10	9	7	13	5	9	5	3	5	5	
Breast.....	269	18	6.7	3	1	3	5	—	3	—	1	2	2	
Mixed.....	43	11	25.6	1	2	—	1	1	2	1	1	1	2	
Artificial.....	199	37	18.6	6	6	4	7	4	4	4	1	1	2	
During first 3 months.....	511	66	12.9	10	9	7	13	5	9	5	3	5	5	
Breast exclusively.....	269	18	6.7	3	1	3	5	—	3	—	1	2	2	
Mixed exclusively.....	15	4	26.7	—	—	—	1	—	—	1	1	1	1	
Artificial exclusively.....	106	16	15.1	3	2	1	6	2	1	1	—	—	—	
More than one type.....	121	28	23.1	4	6	3	1	3	5	3	1	2	2	
At 6 months of age.....	485	40	8.2	—	—	—	13	5	9	5	3	5	5	
Breast.....	138	4	2.9	—	—	—	1	—	—	—	1	2	2	
Mixed.....	71	8	11.3	—	—	—	2	1	1	1	1	1	2	
Artificial.....	276	28	10.1	—	—	—	10	4	8	4	1	1	2	
During first 6 months.....	485	40	8.2	—	—	—	13	5	9	5	3	5	5	
Breast exclusively.....	138	4	2.9	—	—	—	1	—	—	—	1	2	2	
Mixed exclusively.....	14	4	28.6	—	—	—	1	—	—	1	1	1	1	
Artificial exclusively.....	100	10	10.0	—	—	—	6	2	1	1	—	—	—	
More than one type.....	233	22	9.4	—	—	—	5	3	8	3	1	2	2	
At 9 months of age.....	458	13	2.8	—	—	—	—	—	—	5	3	5	5	
Breast.....	58	1	1.7	—	—	—	—	—	—	—	—	1	1	
Mixed.....	86	3	3.5	—	—	—	—	—	—	1	—	2	2	
Artificial.....	314	9	2.9	—	—	—	—	—	—	4	3	2	2	
During first 9 months.....	458	13	2.8	—	—	—	—	—	—	5	3	5	5	
Breast exclusively.....	58	1	1.7	—	—	—	—	—	—	—	—	1	1	
Mixed exclusively.....	8	2	25.0	—	—	—	—	—	—	1	—	1	1	
Artificial exclusively.....	91	1	1.1	—	—	—	—	—	—	1	—	—	—	
More than one type.....	301	9	3.0	—	—	—	—	—	—	3	3	3	3	
Other foreign-born mothers. <sup>1</sup>														
Type of feeding:														
At 3 months of age.....	432	29	6.7	1	4	4	—	3	5	3	4	5	5	
Breast.....	328	13	4.0	—	—	3	—	2	1	1	2	4	4	
Mixed.....	49	6	12.2	1	2	—	—	—	2	1	—	—	—	
Artificial.....	55	10	18.2	—	2	1	—	1	2	1	2	—	—	

<sup>1</sup> Excluding 2 infants surviving 1 year for whom feeding was not reported.

TABLE 41—Continued.

TABLE 41—Continued.		Infants born during selected year and surviving at specified time.												
Type of feeding, age of infant, and nativity of mother.		Died later in year.												
		Total.		In specified month of age.										
				Number.	Per cent.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.	Eleventh.	Twelfth.
FOREIGN-BORN MOTHERS—continued.														
Other foreign-born mothers—Continued.														
Type of feeding—Continued.														
During first 3 months.....	432	29	6.7	1	4	4	.....	3	5	3	4	5	4	5
Breast exclusively.....	327	13	4.0	.....	.....	3	.....	2	1	1	2	.....	.....	.....
Mixed exclusively.....	16	1	6.3	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
Artificial exclusively.....	26	5	19.2	.....	.....	.....	.....	1	1	1	1	1	1	1
More than one type.....	63	10	15.9	1	3	1	.....	.....	3	1	1	1	1	1
At 6 months of age.....	423	20	4.7	.....	.....	.....	.....	3	5	3	4	5	4	5
Breast.....	209	7	3.3	.....	.....	.....	.....	1	1	1	2	2	2	2
Mixed.....	127	6	4.7	.....	.....	.....	.....	1	2	1	.....	.....	.....	.....
Artificial.....	87	7	8.0	.....	.....	.....	.....	1	2	1	2	1	1	1
During first 6 months.....	423	20	4.7	.....	.....	.....	.....	3	5	3	4	5	4	5
Breast exclusively.....	207	7	3.4	.....	.....	.....	.....	1	1	1	2	2	2	2
Mixed exclusively.....	11	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Artificial exclusively.....	26	5	19.2	.....	.....	.....	.....	1	1	1	1	1	1	1
More than one type.....	179	8	4.5	.....	.....	.....	.....	1	3	1	1	1	1	1
At 9 months of age.....	415	12	2.9	.....	.....	.....	.....	.....	.....	3	4	5	4	5
Breast.....	109	8	2.8	.....	.....	.....	.....	.....	.....	.....	2	1	1	1
Mixed.....	192	3	1.6	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	.....
Artificial.....	114	6	5.3	.....	.....	.....	.....	.....	.....	2	2	2	2	2
During first 9 months.....	415	12	2.9	.....	.....	.....	.....	.....	.....	3	4	5	4	5
Breast exclusively.....	108	3	2.8	.....	.....	.....	.....	.....	.....	.....	2	1	1	1
Mixed exclusively.....	11	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Artificial exclusively.....	24	3	12.5	.....	.....	.....	.....	.....	.....	1	1	1	1	1
More than one type.....	272	6	2.2	.....	.....	.....	.....	.....	.....	2	1	1	1	1

**Feeding methods and nationality.**—The practice in regard to breast feeding varied according to nationality, economic status, and gainful employment of the mother. On the whole, foreign-born mothers other than French-Canadian nursed their babies longest. At the end of three months 75.9 per cent of foreign-born mothers except French-Canadian, 60.9 per cent of native mothers, and 52.6 per cent of French-Canadian mothers were exclusively breast feeding their babies. At the end of 6 months these percentages were 49.4, 36.3, and 28.5, respectively. At 9 months the contrast is similar, and in addition at each of these periods the foreign-born mothers other than French-Canadian much more commonly than either of the other classes of mothers were using a mixed diet for their babies. No doubt the great extent of exclusively artificial feeding among babies of French-Canadian mothers is a large factor in accounting for their high infant death rate.

If instead of considering the type of feeding at the end of these three age periods we consider the type during the same periods, we find the same tendency in the different groups, and as far as breast feeding is concerned almost identical percentages in each case.

TABLE 42.  Type of feeding and age of infant.	Per cent distribution of infants of —		
	Native mothers.	Foreign-born mothers.	
		French-Canadian.	Other.
Type of feeding:			
At 3 months of age.....	100.0	100.0	100.0
Breast.....	60.9	52.6	75.9
Mixed.....	6.6	8.4	11.3
Artificial.....	32.5	38.9	12.7
During first 3 months.....	100.0	100.0	100.0
Breast exclusively.....	60.9	52.6	75.7
Mixed exclusively.....	2.0	2.9	3.7
Artificial exclusively.....	14.8	20.7	6.0
More than one type.....	22.2	23.7	14.6
At 6 months of age.....	100.0	100.0	100.0
Breast.....	36.3	28.5	49.4
Mixed.....	16.4	14.6	30.0
Artificial.....	47.4	56.9	20.6
During first 6 months.....	100.0	100.0	100.0
Breast exclusively.....	36.3	28.5	48.9
Mixed exclusively.....	1.3	2.9	2.6
Artificial exclusively.....	14.5	20.6	6.1
More than one type.....	48.0	48.0	42.3
At 9 months of age.....	100.0	100.0	100.0
Breast.....	17.1	12.7	26.3
Mixed.....	27.9	18.8	46.3
Artificial.....	55.1	68.6	27.5
During first 9 months.....	100.0	100.0	100.0
Breast exclusively.....	16.8	12.7	26.0
Mixed exclusively.....	1.3	1.7	2.7
Artificial exclusively.....	13.4	19.9	5.8
More than one type.....	68.6	65.7	65.5

An analysis of the relation of type of feeding to infant mortality according to nationality shows practically no difference in results. The same tendency for a high infant mortality rate to accompany artificial feeding occurs among the babies of both native and foreign-born mothers. As might be expected from the higher general rate, the babies of foreign-born mothers show in nearly all cases, whatever the type of feeding, a higher death rate than babies of native mothers. (See Table 40.)

**Feeding methods in economic groups.**—Native and foreign-born mothers in the same economic classes do not show the same tendencies with reference to the baby's feeding. For the purpose of simplifying the comparison, economic classes were reduced to three—fathers earning under \$650, fathers earning from \$650 to \$1,049, and fathers earning \$1,050 and over. Among native mothers artificial feeding existed to the greatest extent in the poorest class and the percentage of babies artificially fed declined with the rise in father's earnings. Of babies of native mothers 35.4 per cent were artificially fed at 3 months of age in the class where the father's earnings were under \$650; 30.8 per cent where the earnings were \$650 to \$1,049; and 28.1 per cent where the earnings were \$1,050 and over. In contrast to this, among babies of the same age of foreign-born mothers 23.6 per cent were being artificially fed in the

class where father's earnings were under \$650; 31.8 per cent in the next higher class; and 26.4 per cent in the highest economic group, where father's earnings were \$1,050 and over. An analysis of the feeding given at 6 months according to nativity of mother and earnings of father reveals a similar situation.

Among foreign-born mothers, then, the poorest mothers nurse their babies to the greatest extent, and the mothers in the middle economic class nurse their babies least. French-Canadian mothers should be excepted from this generalization since, as has been shown, their general custom in regard to nursing the baby differs radically from that of other foreign-born mothers. Among the Polish mothers the extent of artificial feeding is almost negligible.

TABLE 43.

Infants living and artificially fed at specified age and nationality of mother.

TABLE 43.	Infants born during selected year.					
Infants living and artificially fed at specified age and nationality of mother.	Total.	Whose fathers earned specified amount.				
		Under \$650.	\$650 to \$1,049.	\$1,050 and over.	No earn- ings. <sup>1</sup>	Not re- ported.
ALL MOTHERS.						
Infants living at end of 3 months..	1,444	691	548	168	18	19
Number artificially fed.....	416	182	172	46	9	7
Per cent artificially fed.....	28.8	26.3	31.4	27.4	50.0	36.8
Infants living at end of 6 months..	1,387	661	529	163	17	17
Number artificially fed.....	589	260	245	67	8	9
Per cent artificially fed.....	42.5	39.3	46.3	41.1	47.1	52.8
Infants living at end of 9 months..	1,338	625	519	163	15	16
Number artificially fed.....	683	300	272	95	7	9
Per cent artificially fed.....	51.0	48.0	52.4	58.3	46.7	56.3
NATIVE MOTHERS.						
Infants living at end of 3 months..	499	161	234	96	4	4
Number artificially fed.....	162	57	72	27	4	2
Per cent artificially fed.....	32.5	35.4	30.8	28.1	100.0	50.0
Infants living at end of 6 months..	477	152	223	95	4	3
Number artificially fed.....	226	80	101	39	4	2
Per cent artificially fed.....	47.4	52.6	45.3	41.1	100.0	66.7
Infants living at end of 9 months..	463	142	221	95	3	2
Number artificially fed.....	255	82	112	57	3	1
Per cent artificially fed.....	55.1	57.7	50.7	60.0	100.0	50.0
FOREIGN-BORN MOTHERS.						
Infants living at end of 3 months..	945	530	314	72	14	15
Number artificially fed.....	264	125	100	19	5	5
Per cent artificially fed.....	26.9	23.6	31.8	26.4	35.7	33.3
Infants living at end of 6 months..	910	509	306	68	13	14
Number artificially fed.....	363	180	144	28	4	7
Per cent artificially fed.....	39.9	35.4	47.1	41.2	30.8	50.0
Infants living at end of 9 months..	875	483	296	68	12	14
Number artificially fed.....	428	218	160	38	4	8
Per cent artificially fed.....	48.9	45.1	53.7	55.9	33.3	57.1
French-Canadian mothers.						
Infants living at end of 3 months..	511	260	204	34	6	7
Number artificially fed.....	199	100	80	11	4	4
Per cent artificially fed.....	38.9	38.5	39.2	32.4	66.7	57.1
Infants living at end of 6 months..	485	246	196	31	6	6
Number artificially fed.....	276	139	116	14	4	3
Per cent artificially fed.....	56.9	56.5	59.2	45.2	66.7	50.0
Infants living at end of 9 months..	458	228	188	31	5	6
Number artificially fed.....	314	156	130	21	3	4
Per cent artificially fed.....	68.6	68.4	69.1	67.7	60.0	66.7

<sup>1</sup> Includes 1 father living on his income.

TABLE 43—Continued.

TABLE 43—Continued.		Infants born during selected year.				
Infants living and artificially fed at specified age and nationality of mother.	Total.	Whose fathers earned specified amount.				
		Under \$650.	\$650 to \$1,049.	\$1,050 and over.	No earn- ings. <sup>1</sup>	Not re- ported.
<i>Polish mothers.</i>						
Infants living at end of 3 months..	147	133	11		1	2
Number artificially fed.....	6	5	1			
Per cent artificially fed.....	4.1	3.8	9.1			
Infants living at end of 6 months..	144	130	11		1	2
Number artificially fed.....	12	9	2			1
Per cent artificially fed.....	8.3	6.9	18.2			50.0
Infants living at end of 9 months..	138	124	11		1	2
Number artificially fed.....	21	17	3			1
Per cent artificially fed.....	15.2	13.7	27.3			50.0
<i>English, Irish, and Scotch mothers.</i>						
Infants living at end of 3 months...	103	41	52	7	2	1
Number artificially fed.....	18	4	13	1		
Per cent artificially fed.....	17.5	9.8	25.0	14.3		
Infants living at end of 6 months...	100	39	52	6	2	1
Number artificially fed.....	25	7	16	2		
Per cent artificially fed.....	25.0	17.9	30.8	33.3		
Infants living at end of 9 months...	100	39	52	6	2	1
Number artificially fed.....	30	12	16	2		
Per cent artificially fed.....	30.0	30.8	30.8	33.3		
<i>Other foreign-born mothers.</i>						
Infants living at end of 3 months...	184	96	47	31	5	5
Number artificially fed.....	31	16	6	7	1	1
Per cent artificially fed.....	16.8	16.7	12.8	22.6	20.0	20.0
Infants living at end of 6 months...	181	94	47	31	4	5
Number artificially fed.....	50	25	10	12		3
Per cent artificially fed.....	27.6	26.6	21.3	38.7		60.0
Infants living at end of 9 months...	179	92	47	31	4	5
Number artificially fed.....	63	33	11	15	1	3
Per cent artificially fed.....	35.2	35.9	23.4	48.4	25.0	60.0

<sup>1</sup> Includes 1 father living on his income.

**Effects of feeding modified by income.**—A classification of babies both according to type of feeding and according to father's earnings reveals the fact that the economic status of the family modifies the influence of feeding. Poverty nullifies in part the advantages of breast feeding, while an ample income mitigates the disadvantages of artificial feeding. The reason for this may be, as before noted, that poverty usually means low standards and ignorance on the part of the mother, while ample income makes possible the attainment of higher standards, better medical attention, and greater knowledge in the care of the baby.

In the lowest economic class, in which the fathers earn less than \$650, the percentage of breast-fed babies alive at 3 months who failed to survive till the end of the year was 6.7; in the next class the percentage declined to 3.6, while for the highest class, where fathers earned \$1,050 or more, it was only 2.7. The percentages of deaths among artificially fed babies alive at 3 months were 22, 14.5, and 4.3—in the two lower economic classes percentages 3 and 4 times as large as those for breast-fed babies in the same classes. In the highest class the difference between the percentages almost disappears.

An analysis of the distribution of infant deaths occurring among babies who survived 6 months shows the same results. The percentage of deaths among both breast-fed and artificially fed babies decreased with the advance in economic status. In the highest class, in which fathers earned \$1,050 or more, no babies who had survived 6 months died before the end of the year.

TABLE 44.

TABLE 44.		Infants born during selected year and surviving at specified time.									
Type of feeding at specified age.		Total.	Died later in year.		Whose fathers earned specified amount.						
					Under \$650.			\$650 to \$1,049.			
			Total.	Died later in year.		Total.	Died later in year.				
				Num-ber.	Per cent.		Num-ber.	Per cent.	Num-ber.	Per cent.	
Type of feeding:											
At 3 months of age.....		1,444	138	9.6	691	86	12.4	548	40	7.3	
Breast.....		901	44	4.9	434	29	6.7	338	12	3.6	
Mixed.....		125	20	16.0	75	17	22.7	36	3	8.3	
Artificial.....		416	74	17.8	182	40	22.0	172	26	14.5	
Not reported.....		2						2			
At 6 months of age.....		1,387	81	5.8	661	56	8.5	520	21	4.0	
Breast.....		520	11	2.1	237	8	3.4	203	3	1.5	
Mixed.....		276	15	5.4	164	13	7.9	79	2	2.5	
Artificial.....		589	55	9.3	280	35	13.5	245	16	6.5	
Not reported.....		2						2			

		Whose fathers earned specified amount—Continued.							
Type of feeding at specified age.		\$1,050 and over.			No earnings. <sup>1</sup>		Not reported.		
		Total.	Died later in year.		Total.	Died later in year.	Total.	Died later in year.	
			Number.	Per cent.					
Type of feeding:									
At 3 months of age.....		168	5	3.0	18	4	19	3	
Breast.....		112	3	2.7	7		10		
Mixed.....		10			2		2		
Artificial.....		46	2	4.3	9	4	7	3	
At 6 months of age.....		163			17	3	17	1	
Breast.....		69			5		6		
Mixed.....		27			4		2		
Artificial.....		67			8	3	9	1	

<sup>1</sup> Includes 1 father living on his income.

**Feeding methods and employment of mother.**—Gainful employment of the mother away from home shows a more conspicuous relation to failure to nurse the baby than either nativity or economic status. Among the babies of mothers employed away from home 65.5 per cent were being artificially fed at 3 months of age, as compared with 28.5 per cent artificially fed among the babies of mothers not gainfully employed at that time. Among babies whose mothers

worked at home, however, the percentage of artificial feeding was lower than in either of the above groups—only 18.1. In general this condition was the same both for native and foreign-born mothers. In the native group the percentage of babies weaned at 3 months of age whose mothers were not gainfully employed was 30.2; of those whose mothers worked at home, it was 30.9; but of those whose mothers worked away from home, it was 67.9. Among foreign-born mothers the tendencies according to employment of mother are not identical, but the contrasts are greater. Among babies of foreign-born mothers who worked at home at the time only 15 per cent had been weaned at 3 months; among babies of mothers not employed at all the per cent was 27.4; and among babies of mothers who worked away from home, 64.4. At 6 months 48.3 per cent of the babies of native mothers then employed at home had been weaned, 42.5 per cent in the case of mothers not employed and 83.3 per cent in the case of mothers employed away from home. The proportions for babies of foreign-born mothers weaned at 6 months were 27, 39.1, and 69.6, respectively.

TABLE 45.

Infants born during selected year.

Infants living and artificially fed at specified age and nationality of mother.	Total.	Whose mothers during year following baby's birth—			
		Had no work or began work after time specified.	Began work before time specified and worked—		Did not report time resumed.
			With baby.	Away from baby.	
ALL MOTHERS.					
Infants living at end of 3 months.....	1,444	1,057	288	87	12
Number artificially fed.....	416	301	52	57	6
Per cent artificially fed.....	28.8	28.5	18.1	65.5	50.0
Infants living at end of 6 months.....	1,387	913	299	163	12
Number artificially fed.....	599	369	93	120	7
Per cent artificially fed.....	42.5	40.4	31.1	73.6	58.3
Infants living at end of 9 months.....	1,338	814	297	216	11
Number artificially fed.....	683	420	114	143	6
Per cent artificially fed.....	51.0	51.6	38.4	66.2	54.5
NATIVE MOTHERS.					
Infants living at end of 3 months.....	499	410	55	28	6
Number artificially fed.....	162	124	17	19	2
Per cent artificially fed.....	32.5	30.2	30.9	67.9	33.3
Infants living at end of 6 months.....	477	365	58	48	6
Number artificially fed.....	226	155	28	40	3
Per cent artificially fed.....	47.4	42.5	48.3	83.3	80.0
Infants living at end of 9 months.....	463	342	58	58	5
Number artificially fed.....	255	174	30	49	2
Per cent artificially fed.....	55.1	50.9	51.7	84.5	40.0
FOREIGN-BORN MOTHERS.					
Infants living at end of 3 months.....	945	647	233	59	6
Number artificially fed.....	254	177	35	38	4
Per cent artificially fed.....	26.9	27.4	15.0	64.4	66.7
Infants living at end of 6 months.....	910	548	241	115	6
Number artificially fed.....	363	214	65	80	4
Per cent artificially fed.....	39.9	39.1	27.0	69.6	66.7
Infants living at end of 9 months.....	875	472	239	158	6
Number artificially fed.....	428	246	84	94	4
Per cent artificially fed.....	48.9	52.1	35.1	59.5	66.7

TABLE 45—Continued.

Infants living and artificially fed at specified age and nationality of mother.	Whose mothers during year following baby's birth—				
	Total.	Had no work or began work after time specified.	Began work before time specified and worked—		Did not report time resumed.
			With baby.	Away from baby.	
<i>French-Canadian mothers.</i>					
Infants living at end of 3 months.....	511	385	78	45	3
Number artificially fed.....	199	142	23	32	2
Per cent artificially fed.....	38.9	36.9	29.5	71.1	66.7
Infants living at end of 6 months.....	485	323	80	79	3
Number artificially fed.....	276	166	42	66	2
Per cent artificially fed.....	56.9	51.4	52.5	83.5	66.7
Infants living at end of 9 months.....	458	293	78	84	3
Number artificially fed.....	314	192	49	71	2
Per cent artificially fed.....	68.6	65.5	62.8	84.5	66.7
<i>Polish mothers.</i>					
Infants living at end of 3 months.....	147	74	70	1	2
Number artificially fed.....	6	3	1	1	1
Per cent artificially fed.....	4.1	4.1	1.4	100.0	50.0
Infants living at end of 6 months.....	144	66	68	8	2
Number artificially fed.....	12	4	4	3	1
Per cent artificially fed.....	8.3	6.1	5.9	37.5	50.0
Infants living at end of 9 months.....	138	29	67	40	2
Number artificially fed.....	21.	4	9	7	1
Per cent artificially fed.....	15.2	13.8	13.4	17.5	50.0
<i>English, Irish, and Scotch mothers.</i>					
Infants living at end of 3 months.....	103	74	25	3	1
Number artificially fed.....	18	11	5	1	1
Per cent artificially fed.....	17.5	14.9	20.0	33.3	100.0
Infants living at end of 6 months.....	100	57	32	10	1
Number artificially fed.....	25	14	5	5	1
Per cent artificially fed.....	25.0	24.6	15.6	50.0	100.0
Infants living at end of 9 months.....	100	54	32	13	1
Number artificially fed.....	30	16	7	6	1
Per cent artificially fed.....	30.0	29.6	21.9	46.2	100.0
<i>Other foreign-born mothers.</i>					
Infants living at end of 3 months.....	184	114	60	10	.....
Number artificially fed.....	31	21	6	4	.....
Per cent artificially fed.....	16.8	18.4	10.0	40.0	.....
Infants living at end of 6 months.....	181	102	61	18	.....
Number artificially fed.....	50	30	14	6	.....
Per cent artificially fed.....	27.6	29.4	23.0	33.3	.....
Infants living at end of 9 months.....	179	96	62	21	.....
Number artificially fed.....	63	34	19	10	.....
Per cent artificially fed.....	35.2	35.4	30.6	47.6	.....

**General discussion of feeding methods.**—It appears from these facts that in the case of native mothers both gainful employment away from home and low economic status are frequently accompanied by early weaning of the baby. The mothers who worked away from home are on the whole the poorest mothers; hence the very large proportion of their babies weaned by the age of 3 and 6 months—namely, 67.9 and 83.3 per cent. Among foreign-born mothers, however, low economic status, as has been shown, is accompanied by a general tendency to nurse the baby. Mothers who worked away from home, however, were often required to wean their babies, for 64.4 per cent of these babies were weaned at 3 months and 69.6 per cent at 6 months.



The reason for the divergence in the customs of native and foreign-born mothers (other than French-Canadian) as to the feeding of the baby is not apparent. Possibly the other foreign-born mothers in the poorest classes still follow a custom from which the native mothers, who know more of substitutes for mother's milk, have broken away. The latter and the French-Canadian mothers as well are constantly appealed to by advertisements of patent infant foods. Indeed, one mother gave as a reason for ceasing to nurse her baby that she wanted to try the samples of patent infant foods which had been given her.

Of the native mothers those in the highest economic class, contrary to expectation, practiced breast feeding most commonly, and in this same group, because of access to competent medical advice and because of the better education of the mothers generally, they are apt to make more intelligent use of artificial food and their babies are likely to suffer least from artificial feeding. These very circumstances, however, may explain the reason for the greater readiness of these mothers to nurse their babies, for they would be the class to be reached first by the campaigns of public education in favor of breast feeding which have been carried on in recent years.

**Substitutes for mother's milk.**—Artificially fed babies of the poorer mothers suffer under the extra handicap of the ignorance of such mothers as to the proper feeding of babies. The importance of a pure city milk supply and of infant-welfare stations to this class of babies is obvious. In Manchester the substitutes for mother's milk most frequently resorted to were condensed milk, patent infant foods, and whole milk. Only infrequently did mothers report that they gave their babies modified milk. The cows' milk was usually the same grade as that used for adult consumption.

There are two grades of milk officially recognized by the city department of health, and of these "inspected milk" is the superior and the one suitable for infants. This grade of milk, however, was only provided for by the State board of health in April, 1913, and introduced into Manchester in the same year. About 10 per cent of the entire supply was pasteurized.

#### MATERNAL HISTORIES.

Data were obtained from the mothers regarding all pregnancies which they had had previous to the birth of the baby during the selected year. This information included the following details: The total number of pregnancies and the result of each—that is, whether a live-born child, a stillborn child, or a miscarriage; the year of birth and sex of each child; the number of live-born children who had died, and the age of each at death. An analysis of these maternal histories serves to supplement the more detailed study of infants born during a single year.

The histories of 1,618 mothers form the basis of the study of the issues of all pregnancies. From 6 of the 1,624 mothers of babies

born during the selected year complete maternal histories could not be secured.

**Infant mortality rate, all pregnancies.**—These 1,618 mothers had given birth to 6,061 infants, of whom 1,029 had died in infancy and 174 were stillborn. In addition they reported other pregnancies resulting in 295 miscarriages. The infant mortality rate for 5,887 live-born babies was 174.8, a rate somewhat higher than that found for the babies born during the selected year, which was 165.

Births per mother and nativity of mother.	Total mothers.	Births and infant deaths, all pregnancies.					
		Total births.	Live births.			Stillbirths.	
			Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
				Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1,618	6,061	5,887	1,029	174.8	174	2.9
Births:							
1.....	448	448	421	68	161.5	27	6.0
2.....	310	620	601	73	121.5	19	3.1
3.....	225	675	663	108	165.4	22	3.3
4.....	157	628	614	102	166.1	14	2.2
5.....	115	575	563	75	133.2	12	2.1
6.....	89	534	517	99	191.5	17	3.2
7.....	73	511	500	111	222.0	11	2.2
8.....	52	416	406	71	174.9	10	2.4
9.....	36	324	320	43	134.4	4	1.2
10.....	35	350	337	64	189.9	13	3.7
11.....	26	286	276	67	242.8	10	3.5
12.....	20	240	236	51	216.1	4	1.7
13.....	13	169	166	31	186.7	3	1.8
14.....	9	126	125	44	352.0	1	.8
15.....	3	45	45	6	.....	.....	.....
16.....	6	96	89	13	.....	7	.....
18.....	1	18	18	3	.....	.....	.....
Native mothers.....	540	1,479	1,432	203	141.8	47	3.2
Births:							
1.....	194	194	180	15	83.3	14	7.2
2.....	122	244	237	25	106.5	7	2.9
3.....	93	279	270	40	148.1	9	3.2
4.....	40	160	156	23	147.4	4	2.5
5.....	32	160	158	21	132.9	2	1.3
6.....	25	150	143	26	181.8	7	4.7
7.....	14	98	97	20	.....	1	.....
8.....	6	48	48	13	.....	.....	.....
9.....	5	45	45	4	.....	.....	.....
10.....	3	30	30	2	.....	.....	.....
11.....	4	44	43	7	.....	1	.....
13.....	1	13	11	3	.....	2	.....
14.....	1	14	14	4	.....	.....	.....
Foreign-born mothers.....	1,078	4,582	4,455	826	185.4	127	2.8
Births:							
1.....	254	254	241	53	219.9	13	5.1
2.....	188	376	364	48	131.9	12	3.2
3.....	132	396	383	68	177.5	13	3.3
4.....	117	468	458	79	172.5	10	2.1
5.....	83	415	405	54	133.3	10	2.4
6.....	64	384	374	73	195.2	10	2.6
7.....	59	413	403	91	225.8	10	2.4
8.....	46	368	358	58	162.0	10	2.7
9.....	31	279	275	39	141.8	4	1.4
10.....	32	320	307	62	202.0	13	4.1
11.....	22	242	233	60	257.5	9	3.7
12.....	20	240	236	51	216.1	4	1.7
13.....	12	156	155	28	180.6	1	.6
14.....	8	112	111	40	360.4	1	.9
15.....	3	45	45	6	.....	.....	.....
16.....	6	96	89	13	.....	7	.....
18.....	1	18	18	3	.....	.....	.....

<sup>1</sup> Not shown where base is less than 100.

**Stillbirths and miscarriages.**—The stillbirths reported formed but a small proportion of all births. It is likely, however, that the number of stillbirths and of miscarriages is understated. The registration of stillbirths is less complete than the registration of live births, and it is more difficult to secure from the mother information about both stillbirths and miscarriages than about live-born children.

TABLE 47

Pregnancies <sup>1</sup> per mother and nativity of mother.	Number of mothers.							
	Total.	Reporting specified number of miscarriages.						
		None.	1	2	3	4	5	6
All mothers.....	1,618	1,425	125	46	15	4	1	2
Pregnancies:								
1.....	433	433						
2.....	301	287	14					
3.....	215	192	19	3	1			
4.....	170	139	23	7	1			
5.....	107	90	11	6				
6.....	103	78	18	7				
7.....	72	56	9	4	2	1		
8.....	50	36	6	7	1			
9.....	45	33	8	3	1			
10.....	32	22	5	2	1	2		
11.....	30	21	4	2	3			
12.....	17	12	2		2	1		
13.....	19	11	3	3	1		1	
14.....	10	7	1		1			1
15.....	8	4	1	1	1			1
16.....	5	3	1	1				
17.....	1	1						
Native mothers.....	540	481	37	17	2	3		
Pregnancies:								
1.....	188	188						
2.....	117	110	7					
3.....	90	79	9	2				
4.....	46	33	8	5				
5.....	28	25	2	1				
6.....	28	19	3	6				
7.....	18	12	4		1	1		
8.....	10	6	2	1	1			
9.....	3	2		1				
10.....	4	3				1		
11.....	5	3	1	1				
12.....	1					1		
14.....	2	1	1					
Foreign-born mothers.....	1,078	944	88	29	13	1	1	2
Pregnancies:								
1.....	245	245						
2.....	184	177	7					
3.....	125	113	10	1	1			
4.....	124	106	15	2	1			
5.....	79	65	9	5				
6.....	75	59	15	1				
7.....	54	44	5	4	1			
8.....	40	30	4	6				
9.....	42	31	8	2	1			
10.....	28	19	5	2	1	1		
11.....	25	18	3	1	3			
12.....	16	12	2		2			
13.....	19	11	3	3	1		1	
14.....	8	6			1			1
15.....	8	4	1	1	1			1
16.....	5	3	1	1				
17.....	1	1						

<sup>1</sup> Including miscarriages.

The information obtained regarding miscarriages and stillbirths is probably the least reliable of any of the data contained in the maternal histories. It presents, however, at least a minimum statement of the extent of loss of infant life from these causes. There were 174 stillbirths reported by 153 mothers and 295 miscarriages reported by 193 of the 1,618 mothers. Six was the largest number of either stillbirths or miscarriages recorded for any mother.

TABLE 48.

Births per mother and nativity of mother.		Number of mothers.					
		Total.	Reporting specified number of stillbirths.				
			None.	1	2	3	6
All mothers.....	1,618	1,468	138	12	2		1
Births:							
1.....	448	421	27				
2.....	310	291	19				
3.....	225	206	18	2			
4.....	157	144	12	1			
5.....	115	104	10	1			
6.....	89	76	10	2	1		
7.....	73	63	9	1			
8.....	52	48	8	1			
9.....	36	32	4				
10.....	35	25	8	1	1		
11.....	26	18	6	2			
12.....	20	16	4				
13.....	13	11	1	1			
14.....	9	8	1				
15.....	3	3					
16.....	6	4	1				1
18.....	1	1					
Native mothers.....	540	497	40	2	1		
Births:							
1.....	194	180	14				
2.....	122	115	7				
3.....	93	84	9				
4.....	40	37	2	1			
5.....	32	30	2				
6.....	25	20	4		1		
7.....	14	13	1				
8.....	6	6					
9.....	5	5					
10.....	3	3					
11.....	4	3	1				
13.....	1			1			
14.....	1	1					
Foreign-born mothers.....	1,078	968	98	10	1		1
Births:							
1.....	254	241	13				
2.....	188	176	12				
3.....	132	121	9	2			
4.....	117	107	10				
5.....	83	74	8	1			
6.....	64	56	6	2			
7.....	59	50	8	1			
8.....	46	37	8	1			
9.....	31	27	4				
10.....	32	22	8	1	1		
11.....	22	15	5	2			
12.....	20	16	4				
13.....	12	11	1				
14.....	8	7	1				
15.....	3	3					
16.....	6	4	1				1
18.....	1	1					

**Age at death.**—A large proportion of the deaths reported by the mothers among all infants borne by them occurred during the early period of infancy. Of the total number of deaths, 218, or 21.2 per cent, occurred within the first two weeks after birth.

The maternal histories do not furnish the details necessary for an extended analysis of the causes of infant mortality in the whole group of 6,061 babies. The influence exercised by economic status, size of family, and other factors is however indicated to some extent.

TABLE 49.

Live births per mother and nativity of mother.	Number of mothers.							
	Total.	Reporting specified number of infant deaths.						
		None.	1	2	3	4	5	Over 5.
All mothers.....	1,501	955	412	123	68	17	8	8
Live births:								
1.....	442	367	75	9				
2.....	310	241	69	12	3			
3.....	219	131	73	13	2			
4.....	156	79	56	15	6			
5.....	115	61	38	13	7		1	
6.....	86	25	38	13	2		1	
7.....	72	16	19	22	11	3	1	
8.....	48	13	15	10	9	1		
9.....	42	11	17	8	5			1
10.....	32	7	6	6	8	5		
11.....	23		5	6	6	2	2	2
12.....	17	1	5	5	3	1	1	1
13.....	12	1	2	3	3	1		2
14.....	8		2		1	2	1	2
15.....	4		1	1				
16.....	4	2			1		1	
18.....	1				1			
Native mothers.....	526	379	112	22	8	2	3	
Live births:								
1.....	187	171	16					
2.....	125	99	24	2				
3.....	87	55	25	6	1			
4.....	39	21	13	5				
5.....	34	19	10	4			1	
6.....	21	7	11	1	1		1	
7.....	13	3	5	3	1		1	
8.....	6		3		2	1		
9.....	5	2	2	1				
10.....	4	2						
11.....	4		1		3			
14.....	1					1		
Foreign-born mothers.....	1,065	576	300	101	60	15	5	8
Live births:								
1.....	255	196	59					
2.....	185	142	36	7				
3.....	132	76	48	6	2			
4.....	117	58	43	10	6			
5.....	81	42	28	9	2			
6.....	65	18	27	12	6	2		
7.....	59	13	14	19	10	3		
8.....	42	13	12	10	7			
9.....	37	9	15	7	5			1
10.....	28	5	4	6	8	5		
11.....	19		4	6	3	2	2	2
12.....	17	1	5	5	3	1	1	1
13.....	12	1	2	3	3	1		2
14.....	7		2		1	1	1	2
15.....	4		1	1				
16.....	4	2			1		1	
18.....	1				1			

TABLE 50.

Births per mother and nativity of mother.	Number of mothers.									
	Total.	Reporting specified number of still-births and deaths of infants aged 2 weeks or less.								
		None.	1	2	3	4	5	6	10	
All mothers.....	1,618	1,316	239	50	8	2	1	1	1	
Births:										
1.....	448	404	44	—	—	—	—	—	—	
2.....	310	279	29	2	—	—	—	—	—	
3.....	225	183	37	3	2	—	—	—	—	
4.....	157	125	25	7	—	—	—	—	—	
5.....	115	88	23	4	—	—	—	—	—	
6.....	89	67	13	7	1	—	1	—	—	
7.....	73	50	14	8	1	—	—	—	—	
8.....	52	36	11	4	1	—	—	—	—	
9.....	36	24	10	2	—	—	—	—	—	
10.....	35	20	11	2	1	1	—	—	—	
11.....	26	12	6	6	2	—	—	—	—	
12.....	20	13	5	1	—	1	—	—	—	
13.....	13	7	5	1	—	—	—	—	—	
14.....	9	3	3	2	—	—	—	—	1	
15.....	3	2	—	1	—	—	—	—	—	
16.....	6	2	3	—	—	—	—	1	—	
18.....	1	1	—	—	—	—	—	—	—	
Native mothers.....	540	463	68	7	1	—	1	—	—	
Births:										
1.....	194	175	19	—	—	—	—	—	—	
2.....	122	113	9	—	—	—	—	—	—	
3.....	93	76	16	1	—	—	—	—	—	
4.....	40	32	6	2	—	—	—	—	—	
5.....	32	25	6	1	—	—	—	—	—	
6.....	25	18	5	1	—	—	1	—	—	
7.....	14	10	3	—	1	—	—	—	—	
8.....	6	4	2	—	—	—	—	—	—	
9.....	5	5	—	—	—	—	—	—	—	
10.....	3	2	1	—	—	—	—	—	—	
11.....	4	2	1	1	—	—	—	—	—	
13.....	1	—	1	—	—	—	—	—	—	
14.....	1	1	—	—	—	—	—	—	—	
Foreign-born mothers.....	1,078	853	171	43	7	2	—	1	1	
Births:										
1.....	254	229	25	—	—	—	—	—	—	
2.....	188	166	20	2	—	—	—	—	—	
3.....	132	107	21	2	2	—	—	—	—	
4.....	117	93	19	5	—	—	—	—	—	
5.....	83	63	17	3	—	—	—	—	—	
6.....	64	49	8	6	1	—	—	—	—	
7.....	59	40	11	8	—	—	—	—	—	
8.....	46	32	9	4	1	—	—	—	—	
9.....	31	19	10	2	—	—	—	—	—	
10.....	32	18	10	2	1	1	—	—	—	
11.....	22	10	5	5	2	—	—	—	—	
12.....	20	13	5	1	—	1	—	—	—	
13.....	12	7	5	—	—	—	—	—	—	
14.....	8	2	3	2	—	—	—	—	1	
15.....	3	—	—	1	—	—	—	—	—	
16.....	6	—	3	—	—	—	—	1	—	
18.....	1	1	—	—	—	—	—	—	—	

**Order of pregnancy and age of mother.**—The relative importance of order of pregnancy and age of mother as factors in infant mortality has never been established.

It is interesting to compare the data for all pregnancies shown in the next table with those presented in Tables 19 and 21, which relate to the babies born during the selected year. Infant mortality rates do not show an absolutely regular trend from one pregnancy to the next, or from one age group to the next, any more than when based upon births during the selected year, but by making comparisons of

groups of three the general tendency to a higher infant mortality rate among later-born children is shown.

TABLE 51.

Births and infant deaths, all pregnancies.

Order of pregnancy and age of mother.	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>		
All pregnancies, all ages.....	6,061	5,887	1,029	174.8	174	2.9
Under 20.....	422	415	100	241.0	7	1.7
20 to 24.....	2,031	1,972	366	186.6	59	2.9
25 to 29.....	1,860	1,816	284	156.4	44	2.4
30 to 34.....	1,065	1,037	161	155.3	28	2.6
35 to 39.....	530	510	90	176.5	20	3.8
40 and over.....	142	130	22	169.2	12	8.5
Not reported.....	11	7	6	.....	4	.....
First pregnancy, all ages.....	1,631	1,574	274	174.1	57	3.5
Under 20.....	324	319	71	222.6	5	1.5
20 to 24.....	877	844	145	171.8	33	3.8
25 to 29.....	328	315	43	136.5	13	4.0
30 to 34.....	79	73	11	.....	6	.....
35 to 39.....	20	20	2	.....	.....	.....
40 and over.....	2	2	1	.....	.....	.....
Not reported.....	1	1	1	.....	.....	.....
Second pregnancy, all ages.....	1,178	1,161	189	164.2	27	2.3
Under 20.....	80	78	23	.....	2	.....
20 to 24.....	621	609	108	177.3	12	1.9
25 to 29.....	353	346	44	127.2	7	2.0
30 to 34.....	102	96	12	.....	6	5.9
35 to 39.....	19	19	2	.....	.....	.....
40 and over.....	2	2	.....	.....	.....	.....
Not reported.....	1	1	.....	.....	.....	.....
Third pregnancy, all ages.....	868	847	149	175.9	21	2.4
Under 20.....	16	16	6	.....	.....	.....
20 to 24.....	330	320	66	206.3	10	3.0
25 to 29.....	370	364	55	151.1	6	1.6
30 to 34.....	114	111	16	144.1	3	2.6
35 to 39.....	33	32	4	.....	1	.....
40 and over.....	3	3	1	.....	.....	.....
Not reported.....	2	1	1	.....	1	.....
Fourth pregnancy, all ages.....	641	626	122	194.9	15	2.3
Under 20.....	2	2	.....	.....	.....	.....
20 to 24.....	139	136	32	235.3	3	2.2
25 to 29.....	320	312	57	182.7	8	2.5
30 to 34.....	137	136	26	191.2	1	.....
35 to 39.....	38	36	4	.....	2	.....
40 and over.....	1	1	.....	.....	.....	.....
Not reported.....	4	3	3	.....	1	.....
Fifth pregnancy, all ages.....	475	465	73	157.0	10	2.1
20 to 24.....	45	44	10	.....	1	.....
25 to 29.....	231	230	38	165.2	1	.....
30 to 34.....	141	137	18	131.4	4	2.8
35 to 39.....	49	46	7	.....	3	.....
40 and over.....	8	8	.....	.....	.....	.....
Not reported.....	1	.....	.....	.....	1	.....
Sixth pregnancy, all ages.....	361	352	53	150.6	9	2.5
20 to 24.....	13	13	3	.....	.....	.....
25 to 29.....	146	142	23	162.0	4	2.7
30 to 34.....	147	145	20	137.9	2	1.4
35 to 39.....	48	47	6	.....	1	.....
40 and over.....	6	5	1	.....	1	.....
Not reported.....	1	.....	.....	.....	1	.....

<sup>1</sup> Not shown where base is less than 100.

TABLE 51—Continued.

Order of pregnancy and age of mother.	Births and infant deaths, all pregnancies.				
	Total births.	Live births.		Stillbirths.	
		Total.	Infant deaths.		Per cent. <sup>1</sup>
			Number.	Infant mortality rate. <sup>1</sup>	
Seventh pregnancy, all ages.....	269	259	50	193.1	10
20 to 24.....	5	5	1	.....	.....
25 to 29.....	72	68	15	.....	4
30 to 34.....	121	120	20	166.7	1
35 to 39.....	60	57	13	.....	3
40 and over.....	11	9	1	.....	2
Eighth pregnancy, all ages.....	200	193	25	129.5	7
20 to 24.....	1	1	1	.....	.....
25 to 29.....	25	24	2	.....	1
30 to 34.....	99	98	13	.....	1
35 to 39.....	61	56	9	.....	5
40 and over.....	14	14	.....	.....	.....
Ninth pregnancy, all ages.....	146	142	29	204.2	4
25 to 29.....	8	8	3	.....	.....
30 to 34.....	64	63	14	.....	1
35 to 39.....	59	57	10	.....	2
40 and over.....	14	13	1	.....	1
Not reported.....	1	1	1	.....	.....
Tenth pregnancy, all ages.....	108	99	23	.....	4
25 to 29.....	4	4	2	.....	.....
30 to 34.....	32	31	4	.....	1
35 to 39.....	50	49	14	.....	1
40 and over.....	17	15	3	.....	2
Eleventh pregnancy, all ages.....	76	72	14	.....	4
25 to 29.....	2	2	1	.....	.....
30 to 34.....	16	14	5	.....	2
35 to 39.....	41	40	5	.....	1
40 and over.....	17	16	3	.....	1
Twelfth pregnancy, all ages.....	49	47	11	.....	2
25 to 29.....	1	1	1	.....	.....
30 to 34.....	7	7	.....	.....	.....
35 to 39.....	27	27	5	.....	.....
40 and over.....	14	12	5	.....	2
Thirteenth pregnancy, all ages.....	31	28	10	.....	3
30 to 34.....	4	4	1	.....	.....
35 to 39.....	13	12	7	.....	1
40 and over.....	14	12	2	.....	2
Fourteenth pregnancy, all ages.....	19	18	5	.....	1
30 to 34.....	2	2	1	.....	.....
35 to 39.....	9	9	2	.....	.....
40 and over.....	8	7	2	.....	1
Fifteenth pregnancy, all ages.....	9	9	1	.....	.....
35 to 39.....	2	2	.....	.....	.....
40 and over.....	7	7	1	.....	.....
Sixteenth pregnancy, all ages.....	4	4	1	.....	.....
35 to 39.....	1	1	.....	.....	.....
40 and over.....	3	3	1	.....	.....
Seventeenth pregnancy, all ages.....	1	1	.....	.....	.....
40 and over.....	1	1	.....	.....	.....

<sup>1</sup> Not shown where base is less than 100.



**Plural births.**—Of the total number of pregnancies 64 resulted in live-born twins and 1 each in stillborn twins and in stillborn triplets. In *Natality and Fecundity*<sup>1</sup> it is stated that the frequency of twins in Scotland in 47 consecutive years from 1855 to 1901 amounted to 11.7 per 1,000 confinements. In Manchester, among the 1,618 mothers reporting the results of 5,994 confinements, the twin pregnancies numbered 10.8 per 1,000.

Exactly half of the 128 live-born twin infants died in infancy. This infant mortality rate of 500 among them, as compared with a rate of 174.8 for all births at all pregnancies and 167.6 for single births at all pregnancies, conforms with the usual findings in foreign countries as regards the high infant mortality among twins.

TABLE 52.

Age of mother.	Plural births resulting from all pregnancies.					
	Total plural births. <sup>1</sup>	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>2</sup>
			Number.	Infant mortality rate. <sup>3</sup>		
All mothers.....	133	128	64	500.0	5	3.8
Under 20.....	10	10	6	.....	.....	.....
20 to 24.....	38	36	17	.....	2	.....
25 to 29.....	36	36	15	.....	.....	.....
30 to 34.....	20	18	10	.....	2	.....
35 to 39.....	21	20	12	.....	1	.....
40 and over.....	6	6	2	.....	.....	.....
Not reported.....	2	2	2	.....	.....	.....

<sup>1</sup> Twins resulted from 65 pregnancies and triplets from 1 pregnancy.

<sup>2</sup> Not shown where base is less than 100.

**Nationality of mother.**—A classification of the 6,061 babies by nationality of mother showed a higher infant death rate among babies of foreign-born mothers than among babies of native mothers, and also higher rates for the French-Canadian and Polish than for other foreign groups. This same tendency existed when the comparison was limited to infants born during the selected year to these mothers. The rate was 141.8 for natives and 185.4 for all foreign born. The percentage of stillbirths among foreign-born mothers, however, was only 2.8, a percentage lower than that shown for native mothers, which was 3.2. This outcome may have been due to incomplete data on stillbirths, inasmuch as the proportion of stillbirths reported for all mothers was low. (See Table 53.)

<sup>1</sup> Lewis, C. J. and J. Norman, *Natality and Fecundity*, London, 1906, p. 68.

Nationality of mother.	Total mothers.	Births and infant deaths, all pregnancies.					
		Total births.	Live births.			Stillbirths.	
			Total.	Infant deaths.		Number.	Per cent.
				Number.	Infant mortality rate.		
All mothers.....	1,618	6,061	5,887	1,029	174.8	174	2.9
Native mothers.....	540	1,479	1,432	203	141.8	47	3.2
Foreign-born mothers.....	1,078	4,582	4,455	826	185.4	127	2.8
French-Canadian.....	601	2,905	2,815	583	207.1	90	3.1
Polish.....	167	525	517	90	174.1	8	1.5
English, Irish, and Scotch..	111	514	497	63	126.8	17	3.3
Greek and Syrian.....	72	191	187	25	133.7	4	2.1
German.....	30	123	119	18	151.3	4	3.3
Jewish.....	24	114	111	16	144.1	3	2.6
All other and not reported..	73	210	209	31	148.3	1	.5

**Economic status.**—The economic status of the family for the whole period covered by the maternal history was assumed to be indicated, roughly at least, by the amount the father earned in the year following the birth in the selected year. This assumption without doubt is erroneous in individual cases, but it is believed that for the majority of families the earnings of the father did not change sufficiently from year to year to produce a radical change in the standard of living.

The results show, for all mothers, a decline in the infant mortality rate accompanying the advance in economic status with one exception. The infant mortality rate among babies whose fathers earned under \$550 a year was 184.4, while the rate for babies in the next class, whose fathers earned \$550 to \$649, was somewhat higher—195.3; but this exception does not disturb the trend. In the succeeding classes the infant mortality rate decreased steadily, and the rate in the highest economic class, where fathers earned \$1,250 and over, was only 99.3. It is apparent that the same general relation between economic status and the infant mortality rate is revealed here that was found in the analysis of the rate for the babies born during the selected year. The assumption involved in the determination of economic status for the larger group of babies makes the figures presented for them less reliable than those shown for the babies born during the selected year.

TABLE 54.  Father's earnings and nativity of mother.	Births and infant deaths, all pregnancies.						
	Total mothers.	Total births.	Live births.			Stillbirths.	
			Total.	Infant deaths.		Number.	Per cent. <sup>1</sup>
				Number.	Infant mortality rate. <sup>1</sup>		
All mothers.....	1, 618	6, 061	5, 887	1, 029	174.8	174	2.9
Father's earnings:							
Under \$550.....	493	1, 916	1, 866	344	184.4	50	2.6
\$550 to \$649.....	292	1, 108	1, 065	208	198.3	43	3.9
\$650 to \$849.....	419	1, 618	1, 574	288	183.0	44	2.7
\$850 to \$1, 049.....	198	668	647	90	139.1	21	3.1
\$1, 050 to \$1, 249.....	72	268	261	27	108.4	7	2.6
\$1, 250 and over.....	103	307	302	30	99.3	5	1.6
No earnings <sup>2</sup> .....	21	87	84	25	.....	3	.....
Not reported.....	20	89	88	17	.....	1	.....
Native mothers.....	540	1, 479	1, 432	203	141.8	47	3.2
Father's earnings:							
Under \$550.....	87	238	226	36	159.3	12	5.0
\$550 to \$649.....	90	241	232	52	224.1	9	3.7
\$650 to \$849.....	157	475	465	62	133.3	10	2.1
\$850 to \$1, 049.....	100	262	254	32	126.0	8	3.1
\$1, 050 to \$1, 249.....	36	98	98	8	.....	5	.....
\$1, 250 and over.....	61	145	143	8	55.9	2	1.4
No earnings <sup>2</sup> .....	5	7	6	2	.....	1	.....
Not reported.....	4	13	13	3	.....	.....	.....
Foreign-born mothers.....	1, 078	4, 582	4, 455	826	185.4	127	2.8
Father's earnings:							
Under \$550.....	406	1, 678	1, 640	308	187.8	38	2.3
\$550 to \$649.....	202	867	833	156	187.3	34	3.9
\$650 to \$849.....	262	1, 143	1, 109	226	203.8	34	3.0
\$850 to \$1, 049.....	98	406	393	58	147.6	13	3.2
\$1, 050 to \$1, 249.....	36	170	168	19	113.1	2	1.2
\$1, 250 and over.....	42	162	159	22	138.4	3	1.9
No earnings <sup>2</sup> .....	16	80	78	23	.....	2	.....
Not reported.....	16	76	75	14	.....	1	.....

<sup>1</sup> Not shown where base is less than 100.

<sup>2</sup> Includes 1 father living on his income.

**Size of family and infant mortality.**—The relation between the infant mortality rate and the size of the family or number of children born, is the point upon which the maternal histories offer the fullest and most reliable data. All pregnancies excepting those resulting in miscarriages were considered. A marked difference in the infant mortality rates was revealed according to the number of such pregnancies, or births. As a rule the rate increased with the number of children to which the mother had given birth, though this tendency was not altogether regular from one number to the next. That is, a rise in the infant mortality rate did not accompany each single increase in the size of the family.

The general underlying tendency toward a higher infant mortality rate in the larger families is revealed when a classification of the number of births per mother is made by groups of three. This, with one exception, is accompanied by a regular increase in the infant mortality rate from the smallest number to the largest. The infant mortality

rate, according to the number of children, then runs as follows: For children of all mothers who have borne 3 children or less the rate is 148.7; for children of mothers who have borne 4 to 6 (inclusive) it is 162.9; 7 to 9 children, 183.5; in families of 10 to 12 children the infant mortality rate is 214.4; and in families of 13 to 15 children it is 241.1. Seven mothers had had more than 15 children. The infant mortality rate for this group presents an exception to the general tendency of the rate to be higher in large families, for there it falls to 149.5. Inasmuch as the numbers involved here are much smaller than for any of the other groups compared this exception is not of great significance.

On the whole, then, although the infant mortality rate shows the variations noted, the general tendency toward a higher infant death rate in the larger families is clearly established.

TABLE 55.

Births per mother.	Number of mothers.	Live births, all pregnancies.	Infant mortality rate.
All mothers.....	1,618	5,887	174.8
Less than 4 births.....	983	1,675	148.7
4 to 6 births.....	361	1,694	162.9
7 to 9 births.....	161	1,226	183.5
10 to 12 births.....	81	849	214.4
13 to 15 births.....	25	336	241.1
16 births and over.....	7	107	149.5

**Large families and nationality.**—An analysis was made of the size of the family according to nationality. The average number of children born to foreign mothers was 4.3, while among native mothers the average number of children was 2.7. The French-Canadian mothers had the largest families. The average number of children born to these mothers was 4.8. The English, Irish, and Scotch mothers were next in order, with an average of 4.6.

TABLE 56.

Nationality of mother.	Average number of births per mother.	Total mothers.		Mothers reporting specified number of births.									
				Under 4.		4 to 6.		7 to 9.		10 to 12.		13 and over.	
		Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.
All mothers.....	3.7	1,618	100.0	983	60.8	361	22.3	161	10.0	81	5.0	32	2.0
Native mothers.....	2.7	540	100.0	409	75.7	97	18.0	25	4.6	7	1.3	2	.4
Foreign-born mothers....	4.3	1,078	100.0	574	53.2	264	24.5	136	12.6	74	6.9	30	2.8
French-Canadian....	4.8	601	100.0	287	47.8	145	24.1	81	13.5	58	9.7	30	5.0
Polish.....	3.1	167	100.0	104	62.3	48	28.7	13	7.8	2	1.2	....	....
English, Irish, and Scotch.....	4.6	111	100.0	49	44.1	32	28.8	22	19.8	8	7.2	....	....
All other and not reported.....	3.2	199	100.0	134	67.3	39	19.6	20	10.1	6	3.0	....	....

Out of a total of 32 mothers who had had more than 12 children 30 were French Canadians. Mothers of 10 children and over among French Canadians formed 14.6 per cent of the whole number, while among all other foreign-born mothers the percentage who had had this number of children was 3.4. Only 1.7 per cent of the native-born mothers had had as many as 10 children.

**General discussion of maternal histories.**—In addition to furnishing the basis for the few broad generalizations given above the maternal histories offer a wealth of concrete material. These histories take the family as a unit, but within this small unit may be represented many of the adverse conditions which cause the infant mortality in the community as a whole. The method pursued in the study of infant mortality for the community was to seek for coincidences between a high infant death rate and specific adverse conditions. To portray the conditions found in certain families which suffered a large number of infant deaths is the purpose of this section. These statements do not furnish proof that the conditions portrayed are responsible for the deaths cited, but they do serve to make more vivid some of the evils accompanying a high infant death rate already pointed out in the statistical analysis.

The stories of the mothers which follow are arranged for convenient reference according to the number of births the mother has had. Since these records are not given as typical a case table is submitted, which shows the exact distribution of stillbirths and infant deaths among all mothers classified by the number of children they have borne and the number of years they have been married. By referring to this table it is possible to determine the extent to which any case cited is representative of the group as a whole. The causes of death assigned to babies other than those born during the selected year and included in the detailed study are based on the statements of the mothers unless otherwise indicated in the text. The cause of death of the last born child, however, is that reported by the physician on the death certificate. Methods of feeding and the exact length of time when the mother ceased work before the birth of a child or resumed it afterwards are reported only for the last baby.

#### ILLUSTRATIVE CASES.

Schedule 993: The mother, 41 years old, had had 12 children (11 pregnancies) in 22 years. She lost 8; 1 was stillborn at 7 months and the others all died in infancy. Four children, including the last, were living at the time of the agent's visit. The mother worked 2 years before marriage in a cotton mill and 19 years after marriage between pregnancies. She had not worked for wages for the last three years. The father also was a cotton-mill operative. His earnings were \$710 from this source during the year after the last baby's birth, but these were increased \$300 from canvassing during his spare

time. Both parents were literate and were intelligent, hard working, and thrifty. The home would have been good had it not been that smoke and soot from a smokestack near by blew into the back windows and made it difficult to keep the home clean.

Schedule 1287: The mother, 41 years of age, had had 12 children in 22 years, of whom 5 died during their first year from diarrhea. She never had been able to nurse any of her babies but fed them on cows' milk. She was an "old-fashioned" mother who used her own mother's household remedies when her children were sick, and called the doctor only when these failed. She worked in a cotton mill from the age of 14 until she was 20, when her first baby was born. The baby's father is a laborer who earned \$624 the year after the last baby's birth, but the family income was increased \$1,500 by the earnings of older children.

Schedule 120: The mother was 42 years old, twice married, at 18 and at 27 years of age, respectively. In all she had 13 pregnancies, 12 of which occurred in the last 14 years. One, she said, resulted in a miscarriage caused by heavy lifting. Seven children died in infancy; 5, including the last baby, from gastrointestinal troubles. The mother had worked in the cotton mill 3 years before her first and 5 years before her second marriage, but never since. The husband was employed in a cigar factory and reported his earnings at \$546 during the year after the birth of the last baby.

Schedule 206: The mother, 38 years of age, had 13 pregnancies in 20 years. These included 1 pregnancy of twins, which resulted in miscarriage. Among the live-born children had occurred 4 infant deaths and 1 death at 2 years of age. The last baby died in the third month, of cholera infantum. The mother, on the doctor's advice, had resorted in part to artificial feeding with this baby, because her own milk was insufficient. She did all her own housework and resumed it 6 days after the last baby was born. As a girl from 13 to 18 she helped with farm work, but never worked in a factory until after the death of the last baby, when she went into the cotton mill. The father was a cotton-mill employee earning \$481 the year after the last baby was born. The home contained only 5 rooms for 9 people.

Schedule 194: The mother, 41 years old, in 21 years had had 12 pregnancies, 11 live-born children and 1 miscarriage. Four children died in infancy, the last of whooping cough and convulsions at 11 months. The mother had no breast milk for this baby, and after the second month she left it in the care of the baby's older sister, aged 17, while she went out to work by the day. Before marriage and up to the time of the birth of her first baby she had worked in a woolen mill. Since that time she had not been gainfully employed until the last year, when she went out by the day at char work. The father's earnings the year after the baby's birth he reported to be approximately \$414.

Schedule 84: The mother, 35 years of age, married at 16 and had 11 children in 19 years. She lost 7 of these under 1 year of age. For the last 2 years she kept lodgers in addition to her millwork, and

did not cease work at all prior to the birth of the last baby, which was born prematurely and died the first day. She resumed her household tasks 3 days after its birth and her millwork in 2 weeks. The mother attributed the loss of the last child to hard work and worry. Her husband had deserted her several times, and she had been the chief support of the family. He contributed nothing to the family's support the year after the birth of the last baby. She had worked in the cotton mill for the last 8 years, with brief intermissions at the birth of each child.

Schedule 183: The mother was 38 years old, married at 18, and bore 11 children in 20 years. Five died in infancy, 3 of digestive troubles. The last baby was artificially fed from birth because of the mother's lack of milk; it died of cholera infantum in the eighth month. The mother had worked in the cotton mill since the age of 12. After marriage she worked intermittently, chiefly during slack seasons in her husband's employment in the shoe factory. She worked until within 6 months of the birth of the last baby and went back to work in the mill 1 month after. The baby was left in the care of its grandmother while the mother was away at work. Home duties were resumed in part 3 days after the baby's birth. The home consisted of 4 rooms for 8 people in a 4-family tenement. Apart from room overcrowding, conditions were not bad.

Schedule 1195: The mother, 41 years of age, was married twice, the first time at 16 years of age and the second at 36. She had 8 children in 15 years by the first marriage and 3 in 5 years by the second. All were live born, 3 died in infancy, and 1 at 14 months. Two died of digestive troubles. The last baby was living at the time of the agent's visit. The mother had never attempted to nurse it, because she had to go to work. It was left in the care of an older sister from its second month. This mother did not work before marriage, but since marriage has been almost continuously employed between confinements. From 16 to 21 years of age she worked as housemaid; after that in a cotton mill; since her second marriage, in addition to millwork she has kept lodgers. She worked in the mill until 1 month before the last baby was born and went back a month later. She began to do her housework and to care for the lodgers 9 days after confinement. The husband was a painter, whose earnings the last year were \$468. He could not read and write.

Schedule 1209: The mother, 37 years of age, had 11 children in 19 years. She was again pregnant at the time of the agent's visit and had to cease nursing her last baby at 5 months of age on this account. Three children had died in infancy, 2 of cholera infantum. The mother began work in a cotton mill at the age of 13 and worked regularly until marriage. After marriage she continued to work in the mill at intervals. During the year previous to the birth of the last baby she had worked 6 months, but none in the year following. She was unable to read and write. The father's earnings were reported to be \$832.

Schedule 1305: The mother was 29 years of age. She married at the age of 14 and had 11 children in 15 years. Of these 2 died

under 1 year, 3 between the ages of 1 and 2, and 1 at 2 years. Four deaths, including that of the last baby when 15 months old, were due to gastrointestinal diseases. The last baby had been artificially fed after 2 months because the mother had no more milk. The mother went to work in a cotton mill at the age of 13 and worked until she was 16, when her first baby was born. Since then she has continued to work intermittently between confinements, generally for about 6 months out of each year. She ceased work 7 months before the birth of the last baby and did not resume millwork during the year after. The husband was a shoe operative, with earnings of \$550 in a year. The home consisted of 4 rooms for 7 people.

Schedule 1306: The mother, 38 years old, had 11 children in 14 years. The first 6 all died, 5 in infancy and 1 at the age of 13 months. The last baby had to be weaned after the second month because the mother was weak and had no milk. She did all her own housework, including washing, and took up these duties 5 days after the birth of the last baby. She never worked for wages, however. The father was an unskilled employee in a cotton mill, whose earnings the year after the birth of the last baby were reported at \$529. Both parents were illiterate.

Schedule 338: The mother, 44 years of age, had 11 pregnancies (twins once) in 21 years. Among these there had been 1 miscarriage, 3 infant deaths, and 1 death at 1 year. The last were twins, born prematurely and dying shortly after their birth. This mother began work in a cotton mill at the age of 12 and worked until 18. The next 2 years she worked as a waitress and then returned to the cotton mill until her marriage at 23. During her 21 years of married life she had gone out to work at charring irregularly. She ceased to work out 6 months before the birth of the last baby and did not resume work until 11 months afterwards. The husband was a carpenter whose earnings the year after the birth of the twins were reported at \$775. The home consisted of 4 rooms for 9 persons in a 12-family tenement.

Schedule 198: The mother, 47 years of age, married at 27 and had 13 pregnancies in 20 years. Three resulted in miscarriages and 1 in stillbirth. The mother thought her milk not nourishing and did not nurse the last baby but fed it on a prepared infant food, which, however, failed to agree with the baby, who died in its fourth month of marasmus. This mother worked in a mill 13 years before marriage, from the age of 12 to 25, but never since. Her husband earned over \$1,250 a year.

Schedule 207: The mother was 37 years of age. Ten children (twins at seventh pregnancy) were born in 18 years, 4 of whom died in infancy, 3 of them of gastrointestinal diseases. The mother was unable to nurse the last baby because she had no milk. She said her children were born weak because of her overwork. She first went to work at the age of 14, in a cotton mill, and worked regularly until marriage at the age of 19. After marriage she worked between confinements. She ceased to work in the mill 3 months before the birth of the last baby and went back to her work when



the baby was 3 months old. The child was left in the care of its grandmother, 75 years old, and died 6 weeks later. The father worked in a cotton mill also, and his earnings during the year following the birth of the last baby were approximately \$424. Both parents were illiterate.

Schedule 226: The mother, aged 37, had 11 pregnancies in 19 years, 1 resulting in a miscarriage and 3 in stillbirths. The last 2 children died in infancy, 1 at 3 weeks and 1 at 15 days, of spina bifida. The mother said she had lost these 2 and had had the miscarriage and stillbirths because of "something wrong with the spine." She worked a year in a cotton mill before marriage and occasionally since, but was not gainfully employed the year preceding or following the birth of the last baby. The father was a cotton-mill employee, earning \$475 the year after the birth of the last baby. Both parents were illiterate.

Schedule 1590: The mother was 33 years old when her last baby was born, and in the 15 years of her married life had borne 10 children. Both of the twins which preceded the last baby had died, 1 at 3 months and 1 at 5 months, and the mother said they were always sickly. The last baby was entirely breast fed for 6 months, but during the remainder of the first year the mother's milk was supplemented by other food. The mother had worked as weaver in a textile mill for a year and a half before marriage. After marriage she continued this work for a year and resumed it for 4 months between the births of her first two children. After leaving the mill before the birth of her second child she kept lodgers for 13 years, but the year before the last baby's birth she ceased all gainful employment. This family of 9 persons lived in their own house of 7 rooms. The mother had done all her own housework up to the day of the last baby's birth, but did not resume all her duties until 1 month afterwards. The father was a retail salesman. His earnings were only \$210, but the family income was increased by the rent from another house which they owned.

Schedule 885: The mother, 38 years of age, had 10 children (9 pregnancies) in 17 years. All were live born. The twins, however, were born prematurely and died in a few minutes. Four other children died at ages ranging from 1 to 6 years. The mother had worked in a cotton mill 6 years before marriage, from the age of 15 to 21, and irregularly afterwards. She worked 8 months of the year preceding the last baby's birth and resumed work 9 months after its birth, leaving the baby in the care of a neighbor. This baby was alive at 1 year of age. The husband was a laborer, earning \$418 the year following the birth of the last child. This income was increased by the mother's earnings.

Schedule 984: The mother, 35 years of age, had 11 pregnancies in 14 years—1 miscarriage and 10 live-born children. One child was born prematurely after a period of 7 months gestation and died when a few days old. Three other children died in their first year, 2 at 6 and 1 at 4 months of age. Six children, including the last baby, were surviving at the time of the agent's visit. The mother went

to work in a cotton mill at the age of 15 and worked there until marriage at the age of 21. Since marriage her only gainful work has been the keeping of lodgers. The father, a shoe operative, reported his earnings as \$713. He was unable to read and write.

Schedule 1486: The mother was 41 years of age. She had 10 children in 17 years; 2 were stillborn and 2 had died in infancy. The mother went to work at the age of 13 in a silk mill. She worked there for 8 years prior to marriage. After marriage she was not gainfully employed until after the birth of the last baby. At this time she worked in a cotton mill from the baby's third to its ninth month, leaving it in the care of its 15-year-old sister. While thus at work she continued nursing the baby, feeding it in the morning, at noon, and at night. The father was a laborer earning \$400 in a year.

Schedule 1663: The mother was 40 years of age and had 11 pregnancies, including 1 miscarriage and 1 stillbirth, in 22 years. Three children died in infancy and 6 were surviving at the time of the agent's visit. The mother had worked in a cotton mill between the ages of 14 and 18. Since marriage she worked out irregularly, at washing and cleaning. She was employed at this work until within a month of the birth of the last baby, but had not engaged in it since. The father was a cotton-mill employee, earning \$582 during the year following the birth of the last baby. The family owned their home, a 6-room cottage, but conditions around it were insanitary. The father had dug a hole in the ground for a cesspool. At the time of the agent's visit this was filled and overflowing a drain into a pool in the garden, about 15 feet from the house. Though there was no sewer connection, the house had city water.

Schedule 161: This mother, 36 years of age, had 10 pregnancies in 15 years. Every one of her children excepting the fourth was born prematurely after a 7 months' period of gestation. The third pregnancy resulted in a miscarriage at 6 months. Three children died in early infancy. The mother suffered from long labors and atony of the uterus. She never was engaged in gainful employment and received assistance with her housework to the extent of having her laundry work done. The husband was a teamster who earned \$702 a year, and this was supplemented by income from property.

Schedule 220: The mother was 49 years of age and had 12 pregnancies in 23 years. These included 3 miscarriages and 9 live-born children. One child died at 3 years of age, and 1, the last, at 11 months. The mother attributed all her miscarriages to her weakness from overwork. The mother weaned the last baby at the end of the first month in order to go to work in the mill. She had worked in the mill 4 years before marriage at 26 years of age, and continued intermittently after marriage, averaging 7 months a year. She ceased her millwork only 2 months before the birth of the last baby and resumed it 1 month after, leaving the baby in the care of a 12-year-old sister. She had partially resumed her household duties 3 days after the baby's birth. The husband worked in a

factory where his earnings the year after the birth of the last child had averaged about \$10 per week. The home, 6 rooms for 8 people in a 4-family rear tenement, was dark and without adequate air.

Schedule 236: The mother was 37 years of age. She had 12 pregnancies in 17 years, 3 of which resulted in miscarriages. Three children died, only 1, however, the last, in infancy. This baby died at 7 months of gastroenteritis. The mother had nursed it 4 months, but ceased then, by the doctor's advice, she said, because the baby was sick. The baby was thereafter fed upon condensed milk. The mother worked in the cotton mill 7 years in all, including the first year after marriage. For the last 2 years she was gainfully employed at home taking care of children while their mothers were away at work. The father was a laborer and earned the year after the birth of the last baby only \$260. This was increased by the earnings of others in the family. Neither parent could read or write. The home consisted of 4 rooms for the 8 members of the family, and during the day the 3 children of neighbors of whom the mother had charge.

Schedule 468: The mother was 34 years old. She married at 15 and in 19 years had 13 pregnancies, including 4 miscarriages. She lost 1 baby at 7 months from cholera infantum. The last baby was living at the time of the agent's visit and had been artificially fed from birth because the mother had no milk. The mother worked irregularly after marriage at cleaning and char work, and also for a few months in a shoe factory. She was not, however, gainfully employed either during the year preceding or the year following the birth of the last baby. The father was a day laborer. His earnings the last year he reported at \$250, supplemented by \$350 from other sources.

Schedule 244: The mother was 37 years of age and had 9 children in 17 years, 2 of whom she lost at 4 years of age. The last baby died of cholera infantum at 5 months. This baby was weaned at the end of 5 weeks because the mother had to go to work. The mother's earnings were the sole support of the family, which was deserted by the father. She had worked until within 1 month of the birth of the last baby and resumed this work 5 weeks after, leaving the baby in care of an aunt. The home was a 4-room apartment for 7 persons in an 8-family rear tenement.

Schedule 35: The mother, aged 35, had 10 pregnancies in 13 years. Two resulted in miscarriages and 1, the last, in a still-birth. Three babies died in infancy, all of cholera infantum. The premature deliveries the mother and doctor both attributed to overwork. The mother worked in a cotton mill until within 3 weeks of the birth of the last baby, and had averaged about 7 months' work a year between confinements. She worked for 8 years previous to her marriage, beginning at the age of 14. The father also worked in the cotton mill, and his earnings the year following the birth of the last baby were \$550. The mother did not work during this period. The home consisted of a poorly ventilated 4-room apartment for 6 people in a 3-family house in the congested section. The mother could read and write, but the father could not.

Schedule 690: The mother was 36 years of age and in 16 years she had 8 pregnancies, all resulting in live births. She lost 4 babies in infancy and 1, the last, died in its thirteenth month of infantile paralysis. Three children were surviving at the time of the agent's visit. The mother did not know the cause of death of her babies—"they just died." She had not been able to nurse the last baby. This mother had worked in a textile mill 6 years, previous to marriage, from the age of 14 to 20, and in a woollen mill at intervals since marriage, aggregating about 55 months. She worked until within 3 months of the birth of the last baby, but not since. The husband was an operative in a textile mill, earning \$470 the year after the last baby's birth. He could not read and write; the mother was literate. The home consisted of 4 rooms in a 5-family tenement in a congested section of the city. The toilet was used in common with other families in the house.

Schedule 867: The mother was 37 years of age. She married at 15 and had 9 pregnancies, 1 of which terminated in a miscarriage, caused, the mother thought, by overwork. Three children died in infancy. Five children, including the last, were living at the time of the agent's visit. This baby had never been nursed, however, because the mother intended to go to work. She had gone out to work for wages since the birth of her last 2 children, 6 years in all. She worked intermittently in a cotton mill during this period, and for the last 2 years had, in addition, kept 1 or 2 lodgers. The year previous to the birth of the last baby she worked in the cotton mill 9 months, until within 2 months of its birth. She returned to work 3 months after, leaving the baby in the care of a sister, aged 13, or of another girl aged 16. The father was a cotton-mill operative, earning about \$500 a year.

Schedule 1059: The mother, 35 years of age, in 13 years had 14 pregnancies, 6 of which resulted in miscarriages. She lost 1 baby at 7 weeks of age, 1 at 16 months, and 1 at 18 months, all of diarrhea. The miscarriages, she said, the doctor attributed to her weakness caused by her work in the mill. Previous to marriage she had been employed as a cotton-mill operative 6 years (from the age of 16) and at intervals since marriage. She had not worked, however, during the year before or following the birth of the last baby. The mother weaned this baby at 4 months because she had again become pregnant, the fifteenth pregnancy. The father's earnings the year following the birth of the last baby were \$540. Neither father nor mother could read and write.

Schedule 1336: The mother, 32 years of age, had married at 16. She had 11 pregnancies, including 3 miscarriages, in 16 years. The miscarriages were attributed by the mother to "weakness," and in one case to a fall. One child died at 6 months, 1 at 1 year of gastrointestinal trouble, 1 at 18 months of convulsions, and 1 as the result of burns; the last baby was living at the time of the agent's visit. The mother had done general housework for 2 years, from the age of 14 to 16. After marriage at 16 she started to work in a cotton mill, where she had worked at intervals ever since. She ceased work only

2 months prior to the birth of the last baby, but did not work during the year following. The husband was a cotton-mill employee whose earnings the year after the baby's birth were \$900.

Schedule 1088: The mother, aged 26, married at 16 and had 8 pregnancies in 10 years. All her children were live born, but she had lost 3 in infancy and 1 at 5 years. Two died at 3 months of cholera infantum, and the other 2 deaths were from pneumonia. Four children, including the last baby, were surviving at the time of the agent's visit. The last child had been artificially fed from birth, because the mother had no milk. This mother had worked in a textile mill since the age of 11, a period of 5 years previous to marriage, and irregularly since. She was not engaged in gainful employment, however, either the year preceding or that following the birth of the last baby. The father's earnings for the year after the last baby's birth approximated \$776. The father could read and write, but the mother could not.

Schedule 1184: The mother was 34 years of age. She had 11 pregnancies in 12 years. Three of these terminated in miscarriages. There were 8 children live born, but 3 died in infancy. The last baby, which was surviving at the time of the agent's visit, was weaned at 2 months because the mother had again become pregnant. This mother worked 6 years, previous to marriage—3 years at domestic service and 3 years as a shoe operative. She had also worked intermittently since marriage, though not during the last 6 years. Her husband was a retail salesman with annual earnings of \$725, which were supplemented by \$120 from other sources.

Schedule 1192: The mother, 36 years of age, had 10 pregnancies in 16 years, 2 of which terminated in miscarriages at 5 months and 2 in stillbirths at 7 months. One child was born prematurely at 8 months and died on the first day; another died at 17 days of diphtheria. Four children, including the last, were surviving at the time of the agent's visit. The last baby, however, had been ill of scrofula since 5 months of age; its eyes had been sore since birth, so that it had to be kept constantly in a dark room. The mother had been compelled to wean this baby when it was 1 week old because she had no strength to nurse it. She resumed part of her household duties in 5 days after the baby's birth and all of them 10 days later. The mother had been gainfully employed as housemaid for 4 years previous to marriage, but had not worked since. The father was a cotton-mill operative and earned \$416, supplemented by \$260 from other sources. The home consisted of 3 rooms in a 4-family tenement in the congested section of the city. This family consisted of 5 people. Twelve people in all used the toilet.

Schedule 1222: The mother, 30 years of age, had been married at 17 and had 9 pregnancies in 13 years. One terminated in a miscarriage at 4 months, and 1 baby, prematurely born at 8 months, died shortly after birth. Another child died at 3 months of whooping cough, and 3 children at 3, 5, and 10 years, respectively, of tuberculosis, of whooping cough, and of pleurisy. The mother had child-bed fever at the birth of the last baby and so was not able to nurse

it. This baby and 2 other children were surviving at the time of the agent's visit. This mother had begun work in a cotton mill at the age of 10, where she worked for 9 years, including 2 years after marriage, but she had not subsequently engaged in gainful employment. The annual earnings of the father were reported by the mother to be over \$1,250. The mother was literate, the father illiterate.

Schedule 1547: The mother, aged 36, had 11 pregnancies in 12 years, including 3 miscarriages after 3 months' periods of gestation. The first miscarriage, the mother said, was caused by overexertion; the 2 succeeding miscarriages, the mother reported, were said by the physician to be due to her weakened condition on account of too frequent pregnancies. The mother was careless of her rugged health, and did not spare herself from overexertion. She had not been gainfully employed since marriage, but had worked in a cotton mill from the age of 18 to 24, previous to marriage. The father earned \$1,092 the year following the birth of the last baby. The home consisted of a 7-room 1-family cottage with adequate light and air. It had no sewer connection, and water from the sink was conveyed from the house through an open drain.

Schedule 36: The mother, who was 41 years of age, had 7 pregnancies in 15 years. The first baby died at 2 weeks and the second at 7 years. The last 2 children were stillborn at 7 months because, the physician stated, of the overwork of the mother. The mother had worked in a cotton mill from the age of 16 until marriage and since marriage it had been her practice to work continuously, unless interrupted for childbearing. It was her custom to work until 6 months pregnant and return to work within a few weeks after childbirth. She did not cease her millwork at all previous to the birth of the last baby and resumed work 1 week after. The father, who was a cotton-mill operative, reported his year's earnings at \$562. The mother's earnings were \$360. Neither parent could read or write. The home consisted of 4 rooms for 5 people in a 5-family tenement. The rooms were dark and ventilation poor.

Schedule 213: The mother was 30 years of age, married at 17, and had 7 pregnancies in 13 years. All of her children were born at term, 1 was stillborn, and 1 died within a few minutes after birth, both deaths caused, the mother thought, by overwork during pregnancy. In addition, 2 other children died in infancy, 1 at 8 months of diarrhea, and the other, the last born, at 4½ months of gastroenteritis. This baby had been weaned by the mother when 3 weeks of age, because she wanted to go to work in the mill. She worked until within 2 months of the birth of this child. She resumed her household duties 4 days after the last baby's birth and went back to her millwork 5 weeks after, leaving the baby in the care of its grandmother. This mother had worked in the cotton mill almost continuously since the age of 13. After marriage it had been her custom to cease work 2 months before the birth of each child, and to resume 2 months after the baby's birth. The father, who was employed in the building trades, earned \$630; the mother's earnings increased this to \$1,100 during the year after the baby's birth. The father could not read and write; the mother was literate.

Schedule 339: The mother was 35 years of age and had 8 pregnancies in 13 years, 1 of which terminated in a miscarriage. Of the 7 live-born children 5, including the last born, died under 6 months of age of malnutrition. The last, which died at 5 months, was nursed only for the first 3 weeks, because the doctor told her, the mother said, that her milk was not good. This mother had worked in a cotton mill from the age of 16 to 22 and for a part of the year prior to the baby's birth, ceasing the work 3 months before, but she did not resume work during the year following. The father was a shoe-factory operative. His earnings were \$634 the year following the last baby's birth.

Schedule 1297: This mother, aged 39, had 7 pregnancies in 15 years, all resulting in live-born children. She lost the first 4; 3 died in infancy and 1 at 16 months, all from malnutrition. The mother had not been able to nurse the last baby on account of lack of milk. This mother worked in a cotton mill 6 years, previous to marriage, from the age of 18 to 24, and since marriage had kept a store in connection with the home. She ceased none of her work previous to the birth of the last baby, and resumed all of it 6 days after. The father was a laborer, with annual earnings of \$511, and the mother earned \$350. The home consisted of a 6-room cottage.

Schedule 1524: The mother was 30 years of age, and in 6 years had 7 pregnancies, including 2 which resulted in miscarriages at 2 and 4 months. She twice gave birth to twins, born alive but prematurely. Three of the 4 twins died in infancy. The last baby and 3 other children were surviving at the time of the agent's visit. This mother had worked for a period of 5 years previous to marriage, 2 years as bookkeeper and 3 years as chambermaid. Since marriage she had kept lodgers now and then. The father was a factory operative, whose earnings approximated \$800 the year following the birth of the last baby. The mother stated, however, that her husband drank, and gave her money only occasionally, so that her brother was obliged to help.

Schedule 18: The mother was 28 years of age. She had 8 pregnancies in 9 years and lost every child. Two were miscarriages at 6 months and 3 were stillborn at full time. The mother thought the cause of these losses was her overwork and too frequent pregnancies. The physician stated that the mother had tuberculosis. The other 3 children died in infancy. The last child was stillborn because of an accident of labor. This mother had worked in a cotton mill for a period of 5 years previous to marriage, from the age of 14 to 19, and since marriage she had worked between confinements. She ceased work 4 months before the birth of the last baby and resumed 5 months afterwards. The mother stated that this was her usual custom. The father's earnings in a year were \$1,170 and the mother's \$164. The home consisted of 5 rooms in a 4-family tenement and had adequate means of ventilation and sanitary facilities, but the building was old, built close to the ground, and unhealthful because of its dampness.

Schedule 38: The mother was 35 years of age and had 6 pregnancies in 16 years. She lost 3 children in all, 1 at 4 years of diphtheria, 1 at 2½ years of gastroenteritis, and the last was stillborn. The mother had worked in a cotton mill for 5 years previous to her marriage at 19, and since then she has been almost continuously employed, working during the major portion of all pregnancies. She ceased work 2 months prior to the birth of the last child and resumed it 3 months after. In addition to her millwork she also kept lodgers during the last year. The father also was a cotton-mill operative, and his earnings during the year following the baby's birth were \$300; the mother's were \$288; and they had \$84 from other sources. Neither parent could read and write. The home was in a 4-family tenement and consisted of 6 rooms for the 5 members of the family and 3 lodgers. Light and air and sanitary facilities seemed adequate.

Schedule 651: The mother, 34 years of age, had 7 pregnancies in 19 years, and had lost all her children but the last 2. One pregnancy resulted in a miscarriage at 3 months, 1 in a stillbirth at 7½ months, and 1 child had died when 5 days old. Two other children died after infancy, 1 at 2 years of cholera infantum and 1 at 1 year of congenital debility. The last baby was weaned at 3 months because of the mother's lack of milk. This mother had worked in a cotton mill since the age of 13. Since marriage it had been her custom to continue work between confinements and during the first 5 months of pregnancy. When the last baby was 7 months old she went back to the mill, leaving the baby in charge of a housekeeper, whom she paid \$4 a week. The father was a cotton-mill operative. He reported his earnings at \$403 during the year following the last baby's birth; the mother's were \$290.

Schedule 707: The mother was 24 years of age and had 6 live-born children in 8 years. The first baby was born prematurely at 7 months and died the day of birth; the next 4 all died of digestive trouble at ages ranging from 5 to 8 months. Three of these were born prematurely. The last child, the only one surviving at the time of the agent's visit, never had been nursed, on account of the mother's sore breasts. This mother began work in a cotton mill at the age of 12 years, where she worked 2 years; from 14 to 16 she worked in a hosiery mill, and after marriage, at 16, she returned to the cotton mill, where she has worked intermittently since—about 3 years in all. She had not been gainfully employed, however, since the birth of her last 2 children. The father was a laborer, earning \$624 during the year following the last baby's birth.

Schedule 328: The mother was 23 years of age and in 6 years had 4 pregnancies, resulting in the birth of 4 live-born children. Only the first child, however, was surviving at the time of the agent's visit. The second and third babies died at 7 and at 15 months, respectively, of diarrhea, and the last baby died at 9 months, of broncho-pneumonia. The mother weaned this baby at 3 months in order to go to work in a textile mill. The mother had begun mill-work at the age of 12, and had continued at it regularly until marriage, at 17; since marriage she had worked between confinements.



The father was a laborer, employed at odd jobs. His earnings the year following the last baby's birth were \$350 and these were supplemented by the mother's earnings, \$333.

Schedule 10: The mother was 39 years of age and had 4 pregnancies in 9 years, 2 of which resulted in the premature birth of stillborn children. One child died at 9 months and 1 was surviving at the time of the agent's visit. This mother worked in the cotton mill from the age of 17 till 21 and also during the years preceding and following the birth of the last baby. She ceased work 1 week prior to the birth of this child, which was stillborn at 8 months, and resumed work 3 weeks after. The father also was an employee in the cotton mill, earning \$600, and the mother earned \$521.

Schedule 1600: The mother had 4 children in 7 years, of whom only the last was living. She began to work in a textile mill at 18 years of age, a year before her marriage, and continued this, with brief interruptions when her first 2 children were born, until she was 24 years old. The first baby died at 1 week of age; the second at 6 months, from measles. The third child lived only 5 minutes. When the last child was born the mother had been doing her own housework and helping in her husband's store until 2 days before the baby's birth, and she resumed these duties when the baby was 1 week old. The family lived in 3 rooms in the rear of the store. The mother nursed her baby throughout the first year. After the seventh month she gave him other food also, because, she said, the doctor advised it. Four other families lived in the building and the toilet was used by 27 persons. The family's income from the store was \$780.

Schedule 258: In the 5 years of her married life this mother, aged 28, had borne 4 children. The first child had died of pneumonia at 18 months and the last baby had died of cholera infantum at 8 months and 17 days. The last baby was breast fed until death. The mother had continued her usual home duties, except laundry work, until the birth of the last baby and resumed them all 2 weeks later. Her family and lodgers, 14 persons in all, occupied 5 rooms in a 2-family house. The home was poorly ventilated and dirty. The father was a textile-mill operative and his earnings during the year following the last baby's birth were \$404, to which was added income from lodgers and other sources.

Schedule 306: The mother was 26 years old and had 3 children in the 4 years of her married life. Only the second child was living. She had worked in a textile mill since she was 19 years old, with intermissions when her first 2 children were born. For a year before the last baby's birth she had not been employed, although she went back to the mill when this baby was 6 months old, leaving him with his grandmother during her absence at the mill. This baby was breast fed until the mother went out to work, when she began to supplement her nursing with other food. A month later she weaned the baby entirely. Both this baby and the first child had died of broncho-pneumonia, the first baby at 21 months and the last at 10

months and 18 days. The father was an engineer earning \$780, and the mother earned \$160. The family lived with 7 other persons in 5 rooms in a 3-family house.

Schedule 313: The mother was 21 years of age and in the 4 years of her married life had 3 children. The last one died of gastro-enteritis just before he was 4 months old. For the first month the baby had mother's milk supplemented by other food, but he was completely weaned at the beginning of the second month. The mother had worked in a textile mill since she was 13 years old. Two months before each baby came she had left the mill, and returned when the baby was 2 months old. The mother had done her housework, except the washing, until the birth of the baby and resumed the housework, in part, 6 days later. A girl of 14 was employed to look after the baby during the mother's absence at the mill. The father was a textile operative. He earned \$383 during the year after the last baby's birth, and the mother earned \$150. They lived in a 5-room flat in an 8-family dwelling.





[illegible]





### INFANT MORTALITY.

Table 57 (continued)

Number of births per mother, infant survivors, infant deaths, and stillbirths.	Total.	Married specified number of years.																													
		Under 2		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	
		1	2																												
3 births.....	228		2	24	56		51	26	17	13	7	7	6	5	3	2	3	1	2												
All surviving 1 year.....	124			10	30	28	12	11	10	4	6	3	4	3	1	2															
None surviving 1 year.....	7		1	2	2	1	1																								
3 infant deaths.....	3																														
2 infant deaths and 1 stillbirth.....	3																														
1 infant death and 2 stillbirths.....	2		1	1	1																										
1 surviving 1 year.....	15			1	4	3	2	1																							
2 infant deaths.....	12		1	4	2	2																									
1 infant death and 1 stillbirth.....	3																														
2 surviving 1 year.....	79		1	11	20	19	11	6	1	3	1	2	1	1	1	1															
1 infant death.....	67		1	8	18	19	10	3	1	3		1	1	1	1	1															
1 stillbirth.....	12			3	2			1	3			1																			
4 births.....	157				6	16	32	32	23	23	10	6	4	2	2																
All surviving 1 year.....	72				1	6	12	17	17	8	5	4	1	1	1																
1 surviving 1 year.....	6																														
2 infant deaths.....	5																														
1 infant death and 2 stillbirths.....	1																														
3 surviving 1 year.....	20				2	2	4	4	3	3	1																				
2 infant deaths.....	14				2	1	3	4	2	1																					
1 infant death and 1 stillbirth.....	6				3	1	1	3	1	2																					
3 surviving 1 year.....	58				3	8	15	8	3	11	3	2	3																		
1 infant death.....	23				3	8	12	7	3	11	3	2	2																		
1 stillbirth.....	6							2	1																						
5 births.....	115				1	3	6	12	24	13	15	12	10	1	3	4	2	2	4	1											
All surviving 1 year.....	59					3	2	6	9	7	10	6	6	1	2	3															
None surviving 1 year.....	1																														
6 infant deaths.....	1																														
1 surviving 1 year.....	1																														
1 infant death and 1 stillbirth.....	1																														



[illegible]



[illegible]



[illegible]

**Table 57—Continued.**

Number of births per mother, infant survivals, infant deaths, and stillbirths.

Total		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
Number of births per mother, infant survivors, infant deaths, and stillbirths.																													
13 births—Continued.																													
8 surviving 1 year.																													
3 infant deaths and 2 stillbirths.																													
9 surviving 1 year.																													
4 infant deaths.																													
10 surviving 1 year.																													
3 infant deaths.																													
11 surviving 1 year.																													
2 infant deaths.																													
1 infant death and 1 stillbirth.																													
12 surviving 1 year.																													
1 infant death.																													
14 births.																													
3 surviving 1 year.																													
12 infant deaths.																													
5 surviving 1 year.																													
8 infant deaths and 1 stillbirth.																													
8 surviving 1 year.																													
6 infant deaths.																													
9 surviving 1 year.																													
3 infant deaths.																													
10 surviving 1 year.																													
4 infant deaths.																													
11 surviving 1 year.																													
3 infant deaths.																													
12 surviving 1 year.																													
1 infant death.																													
15 births.																													
12 surviving 1 year.																													
3 infant deaths.																													

[illegible]

**ILLEGITIMACY.**

The condition of illegitimacy subjects babies to special handicaps which make their welfare a problem somewhat apart from the general problem of infant welfare. Babies born to unmarried parents constitute always an abnormal class and must be dealt with as such. For this reason the schedules secured for them were not included in the general tabulations, but were reserved for separate consideration. (See Table 1.) A record of 44 illegitimate births in Manchester during the period studied was obtained by the agents. Of these, 35 were registered, but of that number complete schedules were obtained in only 11 instances. There were 21 who could not be found or had moved out of town and 3 whom it seemed unwise to visit. The scope of the investigation was not such as to warrant taking the measures necessary to obtain full information regarding either the total number of illegitimate births or the circumstances surrounding all those which were known. The data obtained are recognized as incomplete but are presented for what interest they may have.

Among the 44 babies of illegitimate birth 14 died in infancy and 7 were stillborn. The births were nearly evenly divided between native and foreign-born mothers.

Records of the State board of charities relating to the infant asylum in Manchester, which receives foundlings and dependent babies, are of interest in this connection.

Thirty-two Manchester infants under 1 year of age were received into the asylum during the period covered by this investigation. Of these, 15 were reported as of legitimate birth, 16 as illegitimate, and one as unknown. Among the babies at the asylum 14 infant deaths occurred—8 illegitimate babies, 5 babies born in wedlock, and 1 child whose parentage was unknown. The county hospital also had records of 12 babies born there during the period in question whose mothers were from Manchester, and of these 9 were illegitimate. These three groups (that is, the 44 illegitimate births discovered by this investigation, the 9 illegitimate births recorded at the county hospital, and the 16 babies of illegitimate birth received by the infant asylum) probably overlap to some extent, so that it is not possible to deduce from these figures any conclusions as to the number of babies of illegitimate birth born during the selected year.

**ENVIRONMENT.**

Bad housing, congestion, and insanitary conditions in general, such as dirty streets, defective sewerage, and inadequate or impure water supply are generally regarded in studies of infant mortality as being important factors. These conditions were acute in some parts



of Manchester, but were not extensive. In so far as they did exist, however, there is evidence that they had the same association with high infant mortality rates here as elsewhere. In the central portion of the city were some bad housing areas and congested sections and in the tenement houses agents found many dark rooms as well as dark unventilated toilets.

Though the data presented on housing and sanitation are somewhat meager, they nevertheless show that babies do not thrive in poor and crowded quarters, in tenements, and in alley and rear houses. The exact degree of responsibility, however, of any one of these conditions for infant deaths can not be measured by a comparison of rates. The poverty and low standards of living inevitably bound up with bad housing complicate its effects. It is fair to assume, nevertheless, that to bad housing conditions belongs some share at least in the responsibility for the high infant death rates which accompany them.

#### HOUSING.<sup>1</sup>

A consideration of specified housing defects in connection with the infant mortality rates among babies subjected to them revealed a coincidence of bad housing conditions and a high infant mortality rate. The housing data collected in this study relate to the house in which the baby had lived during the greater part of its first year, and, for stillborn infants, that where the mother had lived during the greater part of her pregnancy.

**Sanitary condition of baby's home.**—Out of a total of 1,624 dwellings of the 1,643 babies scheduled by this investigation, 1,597 had city water and 1,500 had sewer connection for both sink and toilet. The majority of the homes which did not have city water and sewer connection proved to be located on the outskirts of the city where rural conditions prevailed, so that the absence of these facilities did not serve as an index to general bad sanitary and housing conditions.

Data gathered regarding the sanitary condition of the dwelling give further detail to the general picture of housing and sanitary conditions, although they are not presented as factors in the infant mortality rate. Of the 1,624 dwellings, 1,060 were reported good as to means of ventilation, 480 were fair, and 81 poor. The rooms were reported clean in 741 cases, medium in 671, and dirty in 203 cases. There were 1,531 dwellings where the toilet was a water-closet, and for 1,377 of these it was located in the house; 90 dwellings had wet or dry privies. From these statements it appears that the housing and sanitary conditions of a considerable proportion of the homes visited by the agents were fairly good. (See Table 58.)

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<sup>1</sup> See further discussion of housing on p. 131 of this report.

TABLE 58.	Sanitary condition of dwelling.	Number of dwellings occupied by—		
		All mothers.	Native mothers.	Foreign-born mothers.
	Total dwellings.....	1,624	541	1,083
	Means of ventilation:			
	Good.....	1,080	425	655
	Fair.....	480	103	377
	Poor.....	81	13	68
	Not reported.....	3		3
	Rooms:			
	Clean.....	741	261	480
	Medium.....	671	195	475
	Dirty.....	208	52	151
	Not reported.....	9	2	7
	Water supply:			
	City.....	1,597	529	1,068
	Spring.....	8	2	6
	Dug well.....	19	10	9
	Type of toilet:			
	Water-closet.....	1,531	503	1,028
	Wet privy.....	17	8	9
	Dry privy.....	73	29	44
	No toilet.....	2	1	1
	Not reported.....	1		1
	Location of toilet:			
	House.....	1,377	472	905
	Porch.....	16	3	13
	Yard.....	137	47	90
	Cellar.....	72	12	60
	No toilet.....	2	1	1
	Not reported.....	20	6	14
	Sewer connection:			
	Sinks directly connected.....	1,540	510	1,030
	Sinks not directly connected.....	82	30	52
	Not reported.....	1	1	
	Toilet directly connected.....	1,800	493	1,007
	Toilet not directly connected.....	121	46	75
	No toilet and not reported.....	3	2	1

**Street and alley frontage.**—The homes of 1,510 babies had street frontage and 129 alley frontage. Conditions in and around alley and rear houses were found by the agents to be almost uniformly bad, and the infant mortality rate for babies in such houses was high. Live-born babies in these houses numbered 123, or 7.9 per cent of the whole number. These babies died at a rate of 227.6 per 1,000, while the death rate among babies in homes with a street frontage was only 159.4.

TABLE 59.	Location of dwelling.	Births during selected year and infant deaths.					
		Total births.	Live births.			Stillbirths.	
			Total.	Infant deaths.		Number.	Per cent.
				Number.	Infant mortality rate.		
	All locations.....	1,643	1,564	258	165.0	79	4.8
	Street.....	1,510	1,437	229	159.4	73	4.8
	Alley or rear.....	129	123	28	227.6	6	4.7
	Not reported.....	4	4	1			

**Multiple dwellings.**—Two-family and three-family homes which present conditions not greatly different from those of single dwelling houses were very common. They were built usually with but one apartment to a floor, so that each family had light and air on four sides and were found in large numbers in the more open parts of the city. The term tenement house, in the common sense of the word, should apply in Manchester to houses which contained more than one apartment to a floor, though often rows of attached houses of one or more stories were termed tenements, and they presented many features commonly associated with tenement-house conditions. A number of old three-story wooden houses of this type existed in the central portion of the city. The tendency was, however, for houses of four families or more to represent the tenement type and houses of less than four the single-family type.

There were 244 live-born babies whose homes were in single-family houses, 384 in two-family houses, and 435 in three-family houses. Thus over half the babies, 819, had homes in the two-family and three-family houses so common in the city. The dwellings of 283 live-born babies were in four-family to six-family houses, and 186 had homes in houses containing over six families.

Babies whose homes were in multiple dwellings, particularly in buildings which housed a large number of families, had a decidedly higher death rate than those whose homes were in single-family houses. The death rate for babies whose homes were in one-family houses was 86.1; and in houses containing seven or more families, 236.6. The contrasts are sufficient to indicate the disadvantage of a tenement home to babies.

But in this case, as elsewhere, housing conditions reflect economic status, so that the influence of both conditions undoubtedly enters into the rates quoted above.

TABLE 60.

Dwellings per building.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Percent. <sup>1</sup>
			Number.	Infant mortality rate.		
All classes.....	1,643	1,564	258	165.0	79	4.8
Dwellings:						
1.....	254	244	21	86.1	10	3.9
2.....	408	384	59	153.6	19	4.7
3.....	457	435	77	177.0	22	4.8
4 to 6.....	361	283	46	162.5	18	6.0
7 or more.....	196	186	44	236.6	9	4.6
7 to 9.....	98	90	23	.....	8	.....
10 or more.....	97	96	21	.....	1	.....
Not reported.....	38	32	11	.....	1	.....

<sup>1</sup> Not shown where base is less than 100

**Room congestion.**—Of the live-born babies included in this investigation 42.5 per cent had homes where the number of persons exclusive of the baby averaged under 1 per room; 46 per cent where the average was 1 but under 2; 6.8 per cent where the average was 2 but under 3; and 1 per cent had homes in which the average number of persons per room was from 3 to 5. Overcrowded rooms were found more commonly among the foreign born than among the native, particularly among the Poles, whose custom it is to take large numbers of "boarders."

The infant mortality rate showed a steady increase according to the number of persons per room. It was 123.3 where the average was less than 1; 177.8 where the average was 1 but under 2; and 261.7 where the average was 2 but less than 3.

TABLE 61.

TABLE 61.		Births during selected year.																	
Persons <sup>1</sup> per dwelling and nativity of mother.		Total.	According to number of rooms in dwelling.																
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	17	Not reported.
All mothers.....		1,643	5	17	123	342	509	341	133	72	21	7	2	5	2	3	1	2	58
Persons per dwelling:																			
1.....		1					1												
2.....		244	5	12	38	68	75	28	7	8	1	3	2	1	1				2
3.....		243	2	26	67	80	34	19	6	3	2	1	1	1					2
4.....		218		23	55	62	57	8	9	2		3		1	1				
5.....		225		23	46	75	46	18	12		3				1	1			1
6.....		182	2	4	37	69	50	12	6					1	1	1			
7.....		134		3	26	45	31	17	5	5	1				1				1
8.....		121		3	19	49	26	13	7	2			2						
9.....		73	1	2	9	20	17	12	5	4			1						2
10.....		58			8	9	16	15	6	2				1					1
More than 10.....		96			7	24	35	12	8	2	1				1	1	2		3
Not reported.....		48			1		1												46
Native mothers.....		548	3	44	113	159	113	44	39	14	2	2	5	1	2	1	2		4
Persons per dwelling:																			
1.....		1					1												
2.....		113	3	16	32	35	15	6	6										
3.....		122		13	30	42	16	9	6	3	1	1	1						
4.....		85		5	22	21	25	4	5	1		1	1						
5.....		73		7	13	23	15	4	9		1	1							1
6.....		59		1	11	19	18	4	4				1		1				
7.....		31		1	1	7	9	4	5	4									
8.....		19			1	7	4	3	1	1			2						
9.....		14			2	1	3	3	1	3			1						
10.....		15				3	3	6	2	1									
More than 10.....		12			1	1	4	1		1						1	1	2	
Not reported.....		4			1														3
Foreign-born mothers.....		1,095	5	14	79	229	350	228	89	33	7	5			1	1			54
Persons per dwelling:																			
1.....		131	5	9	22	36	40	13	1	2	1								2
2.....		121	2	13	37	38	18	10			1								2
3.....		133		18	33	41	32	4	4	1									
4.....		152		16	33	52	31	14	3		2				1				
5.....		123	2	3	26	50	32	8	2										
6.....		103		2	25	38	22	13		1	1								1
7.....		102		3	18	42	22	10	6	1									
8.....		59	1	2	7	19	14	9	4	1									2
9.....		43			8	6	13	9	4	1					1				1
10.....		84			6	23	31	11	8	1	1								3
More than 10.....						1													43
Not reported.....		44																	
French-Canadian mothers.....		610	2	10	36	130	226	128	49	14	3	3			1	1			7
Persons per dwelling:																			
1.....		82	2	7	13	23	26	7		2	1								1
2.....		77	2	7	24	24	9	8			1								2
3.....		86		8	21	31	20	3	2	1									
4.....		101		6	22	41	22	7	1		1					1			
5.....		71	1	1	12	35	16	5	1										
6.....		57		1	10	23	15	6		1	1								

<sup>1</sup> Baby born during selected year not included in number.

TABLE 61—Continued.

Persons <sup>1</sup> per dwelling and nativity of mother.	Births during selected year.																	
	Total.	According to number of rooms in dwelling.																
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	17	Not reported.
French-Canadian mothers—Con.																		
Persons per dwelling—Continued.																		
8.....	53				8	25	10	6	4									1
9.....	28				4	10	7	6										1
10.....	20				5	3	6	3	2				1					1
More than 10.....	33				1	8	16	5	2									2
Not reported.....	2																	
Other foreign-born mothers.....	485	3	4	43	99	124	100	40	19	4	2							47
Persons per dwelling:																		
2.....	49	3	2	9	13	14	6	1										1
3.....	44			6	13	14	9	2										
4.....	47			10	12	10	12	1	2									
5.....	51			10	11	11	9	7	2		1							
6.....	52	1		2	14	15	16	3	1									
7.....	46			1	15	15	7	7										1
8.....	49			3	10	17	12	4	2	1								
9.....	31	1		2	3	9	7	3	4	1								1
10.....	23				3	8	7	6	2	1								1
More than 10.....	51				5	15	15	6	6	1	1							2
Not reported.....	42						1											41

<sup>1</sup> Baby born during selected year not included in number.

TABLE 62.

Persons <sup>1</sup> per room and nativity of mother.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent. <sup>2</sup>
			Number.	Infant mortality rate. <sup>3</sup>		
All mothers.....	1,643	1,564	258	165.0	79	4.8
Less than 1.....	698	665	82	123.3	33	4.7
1 but less than 2.....	760	720	128	177.8	40	5.3
2 but less than 3.....	110	107	28	261.7	3	2.7
3 but less than 5.....	15	15	2			
Not reported.....	60	57	18		3	
Native mothers.....	548	523	67	128.1	25	4.6
Less than 1.....	332	318	34	106.9	14	4.2
1 but less than 2.....	199	188	27	143.6	11	5.5
2 but less than 3.....	12	12	5			
Not reported.....	5	5	1			
Foreign-born mothers.....	1,095	1,041	191	183.5	54	4.9
Less than 1.....	366	347	48	138.3	19	5.2
1 but less than 2.....	561	532	101	189.8	29	5.2
2 but less than 3.....	98	95	23		3	
3 but less than 5.....	15	15	2			
Not reported.....	55	52	17		3	
French-Canadian mothers.....	610	574	129	224.7	36	5.9
Less than 1.....	236	221	40	181.0	15	6.4
1 but less than 2.....	325	306	73	238.6	19	5.8
2 but less than 3.....	40	39	13		1	
3 but less than 5.....	2	2				
Not reported.....	7	6	3		1	
Other foreign-born mothers.....	485	467	62	132.8	18	3.7
Less than 1.....	130	126	8	63.5	4	3.1
1 but less than 2.....	236	226	28	123.9	10	4.2
2 but less than 3.....	58	56	10		2	
3 but less than 5.....	13	13	2			
Not reported.....	48	46	14		2	

<sup>1</sup> Baby born during selected year not included in number.    <sup>2</sup> Not shown where base is less than 100.

**Rent.**—Rent furnishes an index to the status of the baby's home less reliable than any other so far used, for the reason that with it should be considered the size of the family and the number of roomers or others in the family. In Manchester, moreover, a number of joint families were encountered; that is, two family groups, such as parents and married children or married brothers and sisters, who occupied one dwelling jointly, sharing expenses, including rent. To attribute to a family in such an arrangement the actual amount of rent paid would indicate quarters really inferior to those they occupied, while obviously it would not be accurate to credit them with the rent of the entire dwelling. Such objections, however, merely impair but do not destroy the usefulness of rent as an index to housing status. In a city as small as Manchester, where the population is very mobile, rents tend toward an equality for equal accommodations. A comparison of the rentals paid with the infant mortality rates for each group may serve at least to reenforce data already presented as to the general tendency of the infant mortality rate to fall as housing conditions improve.

The rents paid in Manchester are most readily grouped in four classes: Less than \$7.50 per month; \$7.50 to \$12.49; \$12.50 to \$17.49; and \$17.50 and over. There were 175 homes of live-born babies where the rental paid was less than \$7.50, and the infant mortality rate among babies in these homes was 211.4. The largest number of babies, 703, was found in homes where the rent paid was \$7.50 up to \$12.49. The rate for this group was 172.1. There were 300 babies in the next class, where the rentals were from \$12.50 to \$17.49, and the infant mortality rate among them was 156.7. Only 62 babies belonged to homes with a rental of \$17.50 and over, and 6 deaths occurred among them. The parents of 186 babies owned their homes and the infant death rate was only 86 per 1,000.

TABLE 63.

Tenure of home and nativity of mother.	Live births during selected year and infant deaths.		
	Total live births.	Infant deaths.	
		Number.	Infant mortality rate. <sup>1</sup>
All mothers.....	1,564	258	165.0
Home owned.....	186	16	86.0
Home not owned.....	1,314	226	172.0
Monthly rental:			
Under \$7.50.....	175	37	211.4
\$7.50 to \$12.49.....	703	121	172.1
\$12.50 to \$17.49.....	300	47	156.7
\$17.50 and over.....	62	6	
Free.....	6		
Boarding.....	68	15	
Not reported.....	64	16	
Native mothers.....	523	67	128.1
Home owned.....	68	6	
Home not owned.....	444	58	130.6
Monthly rental:			
Under \$7.50.....	49	11	
\$7.50 to \$12.49.....	217	36	165.9
\$12.50 to \$17.49.....	103	7	68.0
\$17.50 and over.....	43		
Free.....	1		
Boarding.....	31	4	
Not reported.....	11	3	
Foreign-born mothers.....	1,041	191	183.5
Home owned.....	118	10	84.7
Home not owned.....	870	168	193.1
Monthly rental:			
Under \$7.50.....	126	26	206.3
\$7.50 to \$12.49.....	486	85	174.9
\$12.50 to \$17.49.....	197	40	203.0
\$17.50 and over.....	19	6	
Free.....	5		
Boarding.....	37	11	
Not reported.....	53	13	
French-Canadian mothers.....	574	129	224.7
Home owned.....	71	10	
Home not owned.....	494	118	238.9
Monthly rental:			
Under \$7.50.....	71	19	
\$7.50 to \$12.49.....	283	61	211.8
\$12.50 to \$17.49.....	100	24	240.0
\$17.50 and over.....	11	6	
Free.....	4		
Boarding.....	20	8	
Not reported.....	9	1	
Other foreign-born mothers.....	467	62	132.8
Home owned.....	47		
Home not owned.....	376	50	133.0
Monthly rental:			
Under \$7.50.....	55	7	
\$7.50 to \$12.49.....	198	24	121.2
\$12.50 to \$17.49.....	97	16	
\$17.50 and over.....	8		
Free.....	1		
Boarding.....	17	3	
Not reported.....	44	12	

<sup>1</sup> Not shown where base is less than 100.

## WARDS.

A comparison of infant mortality rates by neighborhoods is another method of measuring the influence of bad environment. This method, however, yielded more or less negative results in Manchester, for the reason that no practicable method was found of comparing good and bad districts.

Births and deaths were recorded by wards, but the ward divisions in Manchester had only political significance; they did not correspond to any division of the city into sections according to the character of the housing, sanitation, or population. The majority of the wards radiated from the center of the city and presented every variety of neighborhood within their boundaries. Such a lack of distinctive character in the wards made it difficult to interpret the infant mortality rate each showed.

The two wards exhibiting the lowest infant mortality rates, wards 5 and 6, with rates of 120.6 and 119.6, respectively, were the wards containing the greatest proportion of people living under rural and semirural conditions. No crowded or congested areas were found within the boundaries of either.

The highest infant death rates were found in wards 2 and 9. In the former there were 51 infant deaths, which made a rate of 236.1, and in the latter ward 48 deaths, a rate of 227.5. Both of these wards had sections varying widely in character, but they also presented conditions which throw some light upon the large numbers of infant deaths occurring in them. Ward 2 was one of the radiating wards and at its inner end exhibited some of the worst living conditions in the city. Over two-thirds of the mothers here were foreign born, the majority being French Canadians and Poles. Ward 9 was on the west side and quite closely built up, with some congested districts. The housing on the whole, however, was much superior to the worst sections in the congested central portion east of Elm Street. A large proportion of the inhabitants of this ward were "mill" people and over two-thirds French Canadians.

The other wards of the city had infant mortality rates which were well within these extremes and which bore no particular relation to neighborhood conditions. A somewhat peculiar contrast appears between the rates revealed for ward 1 and for ward 4. The former, which contained the best residence district of the city, had an infant mortality rate of 177.6, while the latter, which was the most congested ward in the city, had a rate of only 144.7. Such results may be wholly accidental, of course, since the numbers involved are not large, or they may be explicable upon the basis of facts not disclosed by this investigation. In any case, no satisfactory comparison of neighborhoods and rates can be made on the basis of ward divisions, because of the varied conditions found within each ward.



TABLE 64.

Ward of residence.	Births during selected year and infant deaths.					
	Total births.	Live births.			Stillbirths.	
		Total.	Infant deaths.		Number.	Per cent.
			Number.	Infant mortality rate.		
The city.....	1,643	1,564	258	165.0	79	4.8
Ward:						
1.....	111	107	19	177.6	4	3.6
2.....	224	216	51	236.1	8	3.6
3.....	189	179	27	150.8	10	5.3
4.....	244	235	34	144.7	9	3.7
5.....	143	141	17	120.6	2	1.4
6.....	201	184	22	119.6	17	8.5
7.....	150	141	21	148.9	9	6.0
8.....	157	150	19	126.7	7	4.5
9.....	224	211	48	227.5	13	5.8

TABLE 65.

Nationality of mother.	Births during selected year.									
	Total.	Ward of residence.								
		1	2	3	4	5	6	7	8	9
All mothers.....	1,643	111	224	189	244	143	201	150	157	224
Native.....	548	56	68	56	41	78	82	65	47	55
Foreign born.....	1,095	55	156	133	203	65	119	85	110	169
Canadian, French.....	610	37	70	36	62	31	86	42	96	150
Canadian, except French.....	27	4	.....	4	3	3	6	2	.....	5
Polish.....	170	1	68	62	24	2	10	.....	.....	3
English, Irish, and Scotch.....	115	7	5	13	28	17	10	23	4	8
Greek and Syrian.....	72	.....	.....	.....	65	3	4	.....	.....	.....
German.....	30	.....	.....	.....	.....	.....	2	16	9	3
Jewish.....	24	.....	3	3	12	6	.....	.....	.....	.....
Ruthenian and Lithuanian.....	22	.....	4	14	4	.....	.....	.....	.....	.....
All other and not reported.....	25	6	6	1	5	3	1	2	1	.....

# CONCLUSIONS.

**Infant mortality rate.**—The infant mortality rate of 165 for the whole group of 1,564 live-born infants is strikingly high. Not only is it higher than the rate of 124, computed in 1910 for the general registration area of the United States, and higher than that of 101.8 in 1913 for New York City with all its congestion and large foreign element, but it is also several times as high as the rates found in certain foreign countries.

**Environment.**—Bad housing and insanitary environment, in so far as they existed, were accompanied by high infant mortality rates. These conditions were confined to relatively few areas and were not generally prevalent throughout the city. They are, however, likely to become worse and more extensive in the future unless controlled by adequate restriction.

**Low earnings.**—Low earnings of the father indicate in general a low economic status for the family, and in Manchester they were accompanied by a high infant mortality rate. As the father's earnings increased the rate declined substantially.

**Mother's employment.**—Gainful employment of the mother existed principally when the earnings of the father were low. Such employment away from home usually necessitated artificial feeding and was accompanied by an infant mortality rate higher than that accompanying low earnings of father.

**Nationality.**—Babies of foreign-born mothers had a higher rate than those of native mothers, largely on account of the numerous deaths among babies of French-Canadian mothers. The French Canadians as a group, however, occupied a generally higher economic status than other foreign born, and gainful employment of the mother was found to a less extent among them. Their high death rate may be accounted for in part by their large families and the prevalence of artificial feeding.

**Large families.**—In general the later-born children have a greater tendency to a high infant mortality rate than those earlier born. Large families were found chiefly among the French Canadians and among the lower economic groups of other nationalities. The mortality rate among all babies ninth and later in order of birth is considerably higher than the rates for those earlier born in either of these groups with unfavorable rates.

**Artificial feeding.**—Artificial feeding was accompanied by a higher infant mortality rate than breast feeding. Feeding methods reflect standards and customs and the opportunity of the mother to care for the baby. Artificial feeding was practiced most extensively by mothers gainfully employed away from home; by native mothers in the lowest economic class; and by the French Canadians. In each of these groups other conditions coincident to a high infant mortality rate are also present. In the highest economic group, where the food is more likely to be prepared in accordance with instructions of physicians and where other unfavorable conditions tending to produce a high rate are absent, the rates for breast-fed and artificially fed babies are both low, with a slight difference in favor of the breast-fed baby.

## PART II. CIVIC ACTIVITIES AND CONDITIONS.

### ORGANIZATION OF INFANT-WELFARE WORK.

During the period covered by this study organized infant-welfare work in Manchester was in charge of private philanthropy. One organization, the Infant Aid Association, gave its exclusive attention to this work. Its activities were confined to the support during July and August of milk stations, where pure milk was distributed at cost or less to mothers otherwise unable to provide it for their babies. The milk was modified according to the baby's requirements and the mothers were given instruction in the care and feeding of the baby. The association began its work in 1912 with the opening of one milk station. In 1914 the number of milk stations was increased to three, with a staff of four nurses giving full time and a number of physicians giving part time. A total of 266 babies were cared for during the two months. In addition to the instruction of mothers at the stations through mothers' meetings and baby clinics, the mothers and babies were visited in their homes.

The District Nursing Association also has interested itself in infant welfare, referring cases to the Infant Aid Association during the months when the milk stations were open and taking over such cases as needed attention after the milk stations had closed. In 1914 they maintained a special baby nurse who devoted all her time to work with babies. There were in her charge during the year 198 babies. The association also gave mothers who were pregnant advice and attention when needed.

The larger of the two textile-manufacturing establishments maintained visiting nurses for the benefit of the families of its employees. As part of their work during 1914 these nurses made visits to infants and attended maternity cases.

The city did not engage directly in infant-welfare work in any form, but in 1913 it appropriated the sum of \$300 toward the work of the District Nursing Association, and it also made similar appropriations to various institutions for the care of dependent infants and children. The department of health had charge of milk inspection and medical inspection of school children; it did not, however, at that time engage in any activities, educational or otherwise, which had as their special object the promotion of infant health and hygiene.

Since this study was made the infant-welfare activities of Manchester have been considerably broadened; the Infant Aid Associa-

tion maintains a milk station all the year; the District Nursing Association is devoting an increased amount of time toward improving infant health and hygiene and maintains a successful baby clinic; the manufacturing establishment mentioned above has increased its infant-welfare work both directly and through contributions; and the department of health now has an infant-welfare nurse giving full time to such work.

#### BIRTH REGISTRATION.

The registration of births is made compulsory by the State law under penalty of fine.<sup>1</sup> The physician, accoucheur, midwife, or other attendant at birth must report to the town clerk within six days after the birth of the child the facts<sup>2</sup> required by this law. Stillbirths must be registered both as births and as deaths. A fee of 25 cents is provided for the person reporting and a fee of 15 cents to the town clerk for each birth recorded; also a fee of 25 cents to the town clerk for obtaining the facts regarding a birth not reported.

In spite, however, of the penalty attached to failure to obey the law and the fees provided for compliance, Manchester, in common with many other communities within the registration area, has not secured strict enforcement of the law. Violations are prosecuted when discovered, but the city employs no special methods to discover unregistered births other than checking birth and death certificates against each other. No canvass is made for births. Since a burial permit is required from the board of health before interment can take place, the record of infant deaths is more nearly complete than that of births.

The importance of adequate birth registration as a basis for all other infant-welfare work is now coming to be generally recognized. Unless the number and local distribution of births relative to the number and distribution of infant deaths in a community be known it is not possible to organize intelligently plans for the reduction of infant deaths or for the promotion of infant welfare.

#### PHILANTHROPIC INSTITUTIONS AND AGENCIES.

Manchester had a considerable number of philanthropic institutions. These were chiefly under private control, and a number had religious affiliations. Residents had access to six hospitals. One of these was a county hospital located a short distance beyond the city limits, one an isolation hospital maintained by the city, and the other four were private institutions. Three of the latter received a

<sup>1</sup> Chapter 173, Public Statutes, 1901, amended by chapter 60 of the Acts of 1911 and by chapter 39 of the Acts of 1913.

<sup>2</sup> The date and place of birth, name, color, and sex of child, whether living or stillborn, and the name, color, occupation, residence, and birthplace of parents.

small annual appropriation from the city. These hospitals all did general work and accepted obstetrical cases. It was not a common practice, however, among the mothers interviewed to go to the hospital for confinement.

**Private relief.**—Homes for the care of various classes of dependent children and for the aged and infirm were the most numerous of all philanthropic institutions. Altogether there were 20 such homes in Manchester, of which 8 were for children, 5 for the aged, and the 7 remaining for a variety of classes. The children's homes are of most interest in connection with this report. One of these was an infant asylum, which took only children under 4 years of age, and in one other small children and babies were taken care of by the day while the mothers went to work. All were private institutions, but, inasmuch as there was no county or city children's home, children who were public charges were boarded in these homes by the county and city. Parents also sometimes placed their children in them and paid either wholly or in part the cost of their maintenance. The city contributed a small annual appropriation toward the support of the majority of these homes, and the remainder of their support came from private charity.

The New Hampshire Children's Aid and Protective Society, with headquarters at Manchester, was interested in the protection of children, including infants, from abuse and neglect. A part of its work had been the investigation of infant boarding houses, or private homes which took one or more infants to board, in order to discover and abolish unlicensed places and places unfit to receive babies.

Private charitable relief in Manchester was left largely to unorganized effort. One society maintained by the various Protestant churches was engaged primarily in giving general material relief to the poor in their homes. Other societies and institutions gave some material relief incidentally in connection with other lines of philanthropic activity.

The larger factories did a considerable amount of welfare work for the promotion of the health and general well-being of their employees. This work provided for educational and recreational facilities, medical attention both for employees and for members of their families, assistance in building homes, and other activities.

**Public relief.**—Public relief of the poor in Manchester was administered by both the city and the county. The city helped residents, that is, persons who had established a settlement; and the county, nonresidents. The requirements for obtaining a settlement were so difficult to meet, however, that the amount of relief given by the county to inhabitants of Manchester exceeded that given by the city. In 1913 the county aided Manchester families representing 1,341 persons, and disbursed \$14,329.84 for the relief of persons in their

homes. This was exclusive of \$2,176.15 spent for the care of indigent soldiers. In addition the county also spent a considerable sum on indoor relief, for the maintenance of Manchester paupers and prisoners at the county farm, and for the board of dependent children outside, estimated to be \$38,103.05.<sup>1</sup> The amounts disbursed by the city were \$14,825.08 on outdoor relief, \$2,706.04 for the support of dependents in homes, and \$391.25 for the relief of indigent soldiers.

In addition, as stated previously, the city contributed toward the support of various private philanthropic institutions. In 1913 this municipal appropriation amounted to \$5,100, divided among 17 organizations.

The total amount, then, expended by county and city for indoor and outdoor relief in 1913 was \$69,964.01. This was exclusive of aid to soldiers and appropriations to private institutions. With these included the amount was \$77,631.41.

This represents a considerable sum spent for public charitable relief in a city of 74,000 population, but in the absence of definite information concerning the total number of persons and of families helped, and the amounts expended for similar purposes by private charity, it is not possible to draw conclusions with regard to the extent of poverty in the city which this expenditure may indicate.

There were 32 babies included in this investigation whose families were on the county or city records as receiving public aid. On account of the difficulty of identifying names, however, this is likely an understatement of the total number.

**Public care and protection of infants.**—As has already been stated, there were no public institutions for the care of infants or children in Manchester. Dependent children under 3 were cared for at the county almshouse. The published records of the county commissioners showed that 30 babies under 1 year of age were cared for at the county farm in 1913.<sup>2</sup> The private infant asylum referred to above also admitted 20 babies under 1 year of age during the period covered by this investigation.

Private individuals also took infants to board, but the State law requires that when the number received is two or more it is necessary to obtain from the State board of charities a license to maintain a boarding house for infants.<sup>3</sup> The application must first be approved by the local board of health, but supervision thereafter is by the State board of charities. In Manchester during the period covered by this investigation there were two licensed infant boarding houses.

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<sup>1</sup> Estimate based on the percentage which the cost of county outdoor relief in Manchester formed of the total county outdoor relief.

<sup>2</sup> Report of the County Commissioners of Hillsborough County, 1913, pp. 132-160.

<sup>3</sup> Session Laws of 1911, ch. 134, p. 150.

### EDUCATION.

The educational situation in Manchester reflected to some extent the tendency pointed out in earlier pages for the French Canadians and also the Greeks to retain their own community life. The schools were almost equally divided between public and parochial, 27 of the former and 24 of the latter having enrollments of 6,679 and 6,688 pupils, respectively. One of the parochial schools was of the Greek Church and the others Roman Catholic. The standards of the Greek school did not meet the public educational requirements, however, and it therefore held its sessions only after regular school hours, and attendance in a public school was required of its pupils. The remaining parochial schools were all officially approved.

A number of these schools were termed, locally, "French schools"—that is, they were conducted partly in the French language. There was also one "Polish school." All these schools conformed to the law in teaching English part time, but it appeared to be regarded as a foreign language by some of the children in the French schools. This explanation was given by some of the native-born "French" mothers for their inability to speak English. Agents frequently found that school children whom they addressed on the street to inquire for direction were unable to understand English. In the predominantly French section the language of the home, the street, and the shop was French.

### PUBLIC HEALTH AND SANITATION.

**Administration.**—The board of health is the city department primarily concerned with the problem of public health and sanitation, but at the time of this study the scope of its work was considerably limited by inadequate financial support. The board had no full-time executive health officer, and the amount allowed for salaries was quite insufficient to secure the expert service which such a board requires. The expenditures for 1913, exclusive of the cost of maintenance of the isolation and smallpox hospitals, amounted to only \$11,282.56. Of this, \$2,911.05 was expended for medical inspection in the schools, leaving only \$8,371.51 to cover the cost of sanitary inspection, milk and food inspection, maintenance of laboratory, control of contagious diseases, and payment of salaries and office expenses. Three members of the board of health gave part time and served at a nominal salary. One of the members was a physician, but no physician or trained bacteriologist giving full time regularly was in the board's employ. All the executive and administrative business was transacted at the board meetings which were held usually once a week, though extra meetings were called if the occasion demanded. In 1913 the number of meetings held was 55. Four sanitary inspectors acted as the agents of the board of health

and carried out its orders. With a force and budget so limited the work of this department was necessarily handicapped.

Recently, however, there has been a radical change in the city's policy toward health and sanitation. Since March, 1916, Manchester has had a full-time health officer who is reorganizing the department according to modern standards.

Other city departments concerned with the maintenance of public sanitation are the board of public works, the board of water commissioners, the department of buildings, and the police department. The board of public works has charge of the paving and cleaning of streets, the construction and maintenance of sewers, and the scavenger service. The water commissioners have charge of the city water-works. The department of buildings administers the building code, which lays down regulations for the construction and repair of buildings. The police department cooperates with the board of health in the abatement of nuisances and in maintaining cleanliness of back alleys and back yards.

**Milk supply.**—The city consumed daily about 22,000 quarts of milk and 900 quarts of cream, coming from 850 farms.<sup>1</sup> Most of this supply the milk inspector reported to be produced within 20 miles of the city and to be from 12 to 18 hours old when delivered to the consumer. All milk was required to be bottled at the dairy or milk station, and to be retailed only in closed containers. All persons selling milk in the city were required to be licensed and all dealers who purchased from others milk to sell in the city to file with the board of health a list of the names and addresses of all persons or firms from whom they collected their milk. All farms producing milk consumed in Manchester, as well as all city milk plants—that is, depots where milk was shipped and bottled for distribution—were subject to inspection by the board of health.

The work of milk inspection at the time of this inquiry included visiting and scoring the various farms and the city milk plants, the collection and laboratory examination of samples of milk, and the notification and prosecution of violations. Two sanitary inspectors of the board of health gave part time to this work. The chief milk inspector was plumbing inspector also, and in addition inspected and scored barber shops. Obviously this force was too small to do satisfactory work. It was not possible to visit the majority of the farms oftener than once a year, and farms lying at too great a distance could not be visited at all. In 1913-14 inspections were made about 24 miles north, 35 miles east, 12 miles south, and 9 miles west.

As stated above, 850 different farms were reported to be supplying the city with milk. As only 91 licenses were granted in 1913

<sup>1</sup> Private report made to Dairy Division, U. S. Department of Agriculture, by board of health, Manchester, Feb. 4, 1914.



to milkmen, it is evident that the city received the bulk of its milk supply from a large number of small producers scattered through the country who sold to middlemen. Such a supply is the most difficult to safeguard. The number of farms visited and scored in 1913 was 420, not quite half of the total number reported to be sending milk to the city.

The official Dairy Instructors' Association score card was used in the work of inspection and the average score for the 420 farms was 46.38 out of a possible 100 points. Regarding the use and significance of the score card, a bulletin of the United States Department of Agriculture says: <sup>1</sup>

The score card is not a set of peremptory orders, but a system of giving credit for good conditions and marking down for bad ones. It does not ask or expect a man to be perfect, but rates him as it finds his equipment and methods. A dairy in the seventies is usually in acceptable condition.

The chief requirements as to the quality of milk which may be sold in Manchester, contained in the State law and in the local milk regulations, state that milk shall contain at least 12 per cent total solids, and no adulterants or preservatives; that it shall not be produced from diseased cows, nor under insanitary conditions, nor contain more than 500,000 bacteria per cubic centimeter; it shall be maintained at a temperature of not more than 55° F., and must be retailed in sealed receptacles.<sup>2</sup> No standard was required for dairy scores, as the board of health considered that the best results would be accomplished by educating the dairymen and enlisting their voluntary interest in proper methods of production. The scores of the various milkmen were kept on file at the board of health office, and might be consulted by private citizens upon request.

Besides dairy inspection an important supplementary means of controlling the quality of the milk supply, and the only means of enforcing bacteriological standards, is the frequent collection and examination of samples for adulterants and particularly for bacteria. The former director of the United States Hygienic Laboratory, Dr. M. J. Rosenau, has the following to say as to the value of bacteriologic counts:<sup>3</sup>

The health officer who has the advantage of bacteriologic assistance knows that the milk of dairies containing excessive numbers of bacteria is dirty, old, or warm.

With a bacteriologic count as a guide it is comparatively easy to determine the cause of the trouble and institute proper means to correct it. The enumeration of bacteria in milk is, therefore, one of the cheapest and readiest methods at the disposal of the health officers to determine the general sanitary quality of the market milk supply. The laboratory results serve not only as a guide to direct the efforts of the health officer,

<sup>1</sup> "The score card system of dairy inspection." George M. Whittaker, circular 199, revised, Bureau of Animal Industry, U. S. Department of Agriculture, p. 10.

<sup>2</sup> Sanitary Milk Rules, issued by board of health of city of Manchester.

<sup>3</sup> Milk and its Relation to the Public Health, U. S. Hygienic Laboratory, bulletin 56, pp. 436 and 437.

but confirm the conclusions arrived at from an inspection of the dairies and dairy farms.

One great advantage accruing from the bacteriological control of milk is that it affords an opportunity to exclude the milk of diseased cows. \* \* \*

Fresh milk from cows with diseased udders contains an excessive number of streptococci and pus cells, or an excess of pus cells alone. So far as we know, such milk is dangerous for infant feeding.

The total number of samples of milk and cream examined from the Manchester milk supply in 1913 was 826, an average of not quite two a year for every dairy scored, and less than one a year for every farm reported to be supplying milk and cream to Manchester. These were all examined for formaldehyde, but only a portion were examined for other preservatives, for adulterants, and for bacteria. The work of bacteriologic examination of milk was handicapped by lack of adequate laboratory facilities as well as by an insufficient force. In 1914 no bacterial examinations were made, as a sterilizer was not available. Since that time, however, one has been installed.

The board of health at the time of the inquiry employed no trained bacteriologist. The chief milk inspector held a certificate from the New Hampshire College of Agriculture for the completion of a special six weeks' course of instruction for dairy inspectors. The State law makes this provision with reference to the qualifications of milk inspectors:

No milk inspector shall be paid for his services unless he is a registered chemist or is the holder of a certificate from the superintendent of the dairy department of the New Hampshire College of Agriculture and the Mechanic Arts showing the said holder to be qualified to perform such work.<sup>1</sup>

Since 1916 the bacterial analysis of the milk supply has been under the direction of the health officer, a trained bacteriologist.

A method employed by the board of health to discover dirty milk is to strain samples collected through cotton pads. In case the result shows the milk to be dirty, the pad is mounted upon a card which bears upon it the inscription "The dirt upon each of these pads was strained out of a pint of your milk," and this is then mailed to the producer with a warning, and if such warning is not effective his milk is excluded from the city.

The standards for "inspected milk" are somewhat stricter than those given above for the general milk supply.<sup>2</sup> They lay down specific requirements as to the methods and equipment of the dairies, provide for the examination of the cows twice a year for tuberculosis, and require that the milk shall not contain bacteria in excess of 100,000 per cubic centimeter and must be entirely free from pathogenic germs. These regulations were not promulgated until April 15, 1913, so that Manchester did not have the benefit of them during all

<sup>1</sup> Laws of 1904, New Hampshire, ch. 107, p. 607.

<sup>2</sup> Laws of 1911, New Hampshire, ch. 108, p. 112; and State Board of Health Regulations.

the period which this investigation covers. The tubercular test was enforced for inspected milk only. About 10 per cent of the whole supply was pasteurized. The health officer estimates that now about 50 per cent is pasteurized.

Two dairies supplied inspected milk to Manchester. They had a total of about 50 or 60 cows, and in 1913 their scores were 77.6 and 83.2, respectively; in 1914 they scored 81 and 86.8, respectively. The city milk plants scored an average of 71.1.

The importance of a pure milk supply to the health and well-being of babies is well recognized. The facts recited in the foregoing description make it apparent that the milk supply in Manchester was not adequately safeguarded during the period covered by this investigation. The force of inspectors was inadequate and generally lacking in scientific training. Inspections of dairies were too infrequent to maintain standards of production, and the average of the scores which were obtained was considerably below the rating which indicates an acceptable condition. The use of the bacteriologic count would have been of greater value if more samples had been examined.

**Water supply.**—The source of Manchester's water supply is Lake Massebecic, a lake of about 2,500 acres, located to the east of the city and partly within its boundaries. The lake is protected from contamination by city and State regulations as to the use which can be made of its banks. The city owned 82 per cent of the shore. The lake had approximately 40 miles of watershed, about half of which was wooded and half cleared. There was no filtration system or settling basin, but the water was pumped from the lake directly into a reservoir of 15,000,000 gallons capacity, from which it flowed directly into the distributing mains. The local superintendent of the waterworks estimated that about 90 per cent of the population of Manchester were consumers of this water. The service was extensive and accessible to all parts of the city except the outlying districts.<sup>1</sup>

**Streets.**—Manchester, because of the large rural area within the city limits, had a very considerable street mileage—203.6. Of this, however, 72.7 miles were outlying country roads. Paved streets, including "back streets" and "lanes," comprised only 8.6 miles. The pavements used were chiefly tar, concrete, and granite blocks. The back streets and lanes are not included in the total street mileage given above, and their length is not given in the city reports. There are in the city, however, a number of these narrow thoroughfares running between two main streets, called lanes or back streets, which, though they had some houses fronting on them, were practically alleys.

<sup>1</sup> The reports of the State board of health for 1911-12 and 1913-14 give an analysis of this water supply. The former report states that about 99 per cent of the population are consumers of the city water. No opinion as to the quality of the water supply is included in the report. Some index to the quality, however, may be afforded by the fact that there were only five cases of typhoid fever reported in Manchester for 1913.

The usual width of street in Manchester is 50 feet. Elm Street, the main business street, which runs the length of the city, is 100 feet wide. A few streets are 30 and 40 feet, while the lanes—with the exception of Martin Lane, which is only 17 feet—are 20 feet, the same width as the alleys. Portions only of the lanes were paved, and most of them had no sidewalks. Sidewalks, however, were found along all the principal streets; their total length was approximately 200 miles.

The streets in Manchester were kept in a fair condition. Most of the paved streets were cleaned regularly. Some of the unpaved streets were macadamized. Where that was not the case the streets were apt to be very dusty, because of the loose, sandy soil. About 72 miles of streets were regularly sprinkled between the months of April and November. Some oiling was done also. The chief criticism which the agents encountered with regard to the condition of the streets referred to the "lanes." Some of these were found dirty and littered with trash. Also, in the more outlying districts, dusty streets caused complaint in dry weather.

**Sewerage.**—The sewer service in Manchester reaches a large proportion of the population. There was in 1913 a total of 93.5 miles of sewer as compared with 203.6 miles of streets, but the fact that so much of the city is rural territory makes this contrast appear more unfavorable than the situation warrants. All the built-up portion of the city had public sewer service, with the exception of a small section near the mills occupied by "company houses." This portion of the city was built and maintained by the mill corporation and was served in part by private sewers. It contained between six and seven hundred dwellings, all of which have now been connected with the sewer.

For the rest of the city the number of house connections with the sewer on record for 1913 was 7,785. The United States census reports the number of dwellings for Manchester in 1910 to have been 8,694, and the number of house connections recorded for that year was 6,884, or 79.2 per cent of the total number of dwellings. Among the corporation's houses were probably several hundred connections. A city ordinance requires that every house within 100 feet of a public sewer shall be connected.<sup>1</sup>

All sewage flows directly into the river, and the factory wastes empty into the factory canals and thence into the river. No method of purification was employed. In spite of the fact that the sewer exits are into the Merrimack River where it flows through the center of the city, no nuisance was observable from this method of sewage disposal, due to the fact, no doubt, that the mills surround the river in the heart of the city and there are no dwelling houses near its banks.

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<sup>1</sup> Public Statutes, ch. 106, sec. 8, as amended by Laws of 1907, ch. 106, sec. 1.

**Garbage and refuse collection.**—Garbage collection in 1913 was by private scavengers, licensed by the board of public works, which was charged with the duty of regulating and providing for this service. Collections were required to be made twice a week, and the garbage must be kept by the householder in a covered receptacle apart from ashes and rubbish. Part of the garbage was collected and sold to farmers; part was collected by the farmers themselves for use in feeding their hogs. No complaint was made by the families visited of the service rendered by this system. In the congested sections the agents encountered some cases where garbage and rubbish created a nuisance in yards and alleys, but for the city as a whole the conditions observed were fair. A regulation prohibiting the placing of receptacles in highways has gone far toward remedying these conditions. The board of health in its annual report for 1913 makes the following statements with reference to the scavenger service:<sup>1</sup>

Eighty-nine complaints were made against the scavenger service; in each case the proper parties were notified and relief afforded.

Thirty-two persons were found throwing garbage in the back streets and were warned against the practice.

Private swill collectors have been warned 62 times to be neater in their work.

The disposal of rubbish was less satisfactory than that of garbage. The city collected and hauled the rubbish, including not only ashes but rubbish of all sorts—tin cans, crockery, mattresses, paper, etc.—to various dumps located on vacant ground within the city. There were 17 such dumps in use in 1913, and a total of 13,432½ loads, or 71,585.53 cubic yards, of rubbish were collected and deposited upon them. Among the largest was the so-called Putman Street dump, located in a residence district. This dump was not only unsightly and a nuisance because of the odors arising from it, but had more or less organic material mixed with the rubbish which was deposited here. Furthermore, it was a breeding place for germs, flies, and rats and mice. Such articles as old mattresses deposited upon the dumps may readily carry disease directly. The Putman Street dump, at the time this investigation was being carried on, was frequented by people who picked up rags and junk from it. Children also played there. Other dumps were less objectionable. The board of health reports for 1913 that “the dumps have been inspected 65 times; found insanitary 18 times.”

The city authorities made an effort to keep the dumps in as sanitary a condition as possible by burning the combustible material they contained and by covering them with earth, but such a method of rubbish disposal is necessarily unsatisfactory. Since the period to which this report refers, dumping has been discontinued at the Putman

<sup>1</sup> Annual Report of the Board of Health, Manchester, 1913, p. 31.

**Street dump.** The city still has failed, however, to provide for an incineration plant in accordance with present-day standards of sanitary engineering, a step long urged by the board of health and the board of public works.

With the growth of population in Manchester and increase in its density the present relatively primitive methods of sewage and garbage disposal are likely to result in a serious menace to public health. That these methods are not more obnoxious at present is due in part to the size of the city, the distribution of the population over a broad area, and the fact that the water of the Merrimack is used by this city only for manufacturing purposes.

**Housing.**—The mills lining the banks of the Merrimack lie in the heart of the city, and spreading outward from them the population becomes less dense. The river and the mills divide the city into two distinct parts, called locally East and West Manchester. East Manchester is the larger and contains the main business section, with Elm Street, running parallel to the river, as its center. West Manchester also has its business street, Main Street, running parallel to the river and bearing the same relation to the west side that Elm Street does to the east. These two parallel streets bound the mill territory, though the bulk of the mills lie on the east side of the river, and it would be more nearly correct, perhaps, to say that the density of the population decreases as one moves outward from these two streets.

Between Elm Street and the mills, on the east side of the river, lies a section known as the "Corporation." This was built up largely with "company houses," put up many years ago to provide for the employees of the cotton mills in the early days of the city's growth. The majority of these houses were found in two-story brick rows, with small yards and sheds to the rear. Some were built in rows facing each other upon a common yard and had grass plots in front. Others fronted directly upon the street. There were also some three-tenement and four-tenement "blocks."<sup>1</sup> The houses were for the most part substantially built and a number of the streets were lined with shade trees, so that they did not present the barren, dilapidated aspect of many "company rows." Conditions varied somewhat, however. At the time of this investigation there were also a number of old wooden tenements, with yard privies, which presented objectionable conditions. These frame tenements have been removed since and within the past two years eight new five-family brick blocks have been erected within the "Corporation." All yard privies also have been removed from corporation premises. Elsewhere most of the houses encountered were connected with sewers, though in a number of cases the water-closet was in a shed to the rear of the house and the tenants

<sup>1</sup> A tenement building is termed, locally, a "block"; this may apply to one building proper or to a row of attached houses.

complained of its freezing up in winter and getting out of repair. The sewer service, street cleaning, and scavenger service in this district are all provided by the mill corporation. All these houses but two blocks belonged to one company, which also owned what would equal about one city block of houses across the river. In all, this company maintained 629 tenements including 31 boarding houses. The wooden tenements, in reality rows of two-and-a-half-story houses, comprised 11 so-called "blocks" and 60 tenements or dwellings.

The worst housing conditions and the most congested district in the city were found east of Elm Street, in the district extending about 15 city blocks along Elm Street, north and south, and about three blocks east, now chiefly included in the present ward 5. It contained portions of wards 2, 3, and 4, so that it was not possible to obtain the population per acre, but there was a considerable degree of lot crowding within this area, and as most of the buildings, with the exception of those along Elm Street, were wooden, the fire menace was serious. In this district were sixteen 4-story wooden tenements, three of which were rear.<sup>1</sup> This neighborhood contained a number of houses fronting on the so-called "lanes," which in reality were alleys, being only 20 feet wide and presenting alley conditions. There were 40 tenements and 43 houses, chiefly wooden and including rear houses, fronting on these lanes. In a number of cases, besides, the buildings ran through from street to alley, occupying practically the entire lot, and several almost solid city half blocks were found, particularly along Elm Street. Many of the wooden houses were old and in bad repair. Toilets, many of which are now in the tenements, were usually in the basements, one for several families, and often the public also had access. Under such conditions it was almost impossible to maintain them in a fit condition. In some cases the pipes had rusted and were so clogged that it was nearly impossible to flush the closets. In the old and dilapidated houses sanitary conditions generally were bad. Also the danger of fire was great in these places, especially as such houses were heated by stoves and the rooms and public halls frequently lighted by lamps.

Along Elm Street a large proportion of the buildings were brick and on the lower floors were used for the most part for business purposes, and above for tenements. Shops and stores claimed a portion of the other streets also, and a considerable number of public buildings were located in the district. One commendable feature which tended to relieve the general congestion of this section was the existence of four or five open squares or commons.

A small section on the west side of the river, in the ninth ward, now the extreme eastern sections of wards 12 and 13, contained

<sup>1</sup> Data as to numbers of alley houses and tenements obtained from fire insurance map of Manchester, published by Sanborn Map Co.

conditions as bad as described above, but much more limited in extent. This was a triangle containing six city blocks located between the mills and Main Street. At the time of the investigation all but two of the buildings in this area were wooden, and it contained seven 4-story wooden tenements, two of which were rear. There were four rear tenements and one rear house. The blocks were bisected by two small lanes, one of 17 feet and one of 20 feet, on which these rear dwellings were found. The occupants were largely French Canadians. Along Main Street in the central portion of the west side were also some bad housing conditions and instances of lot crowding. Some old dilapidated buildings and tenements were found here and a few rear houses, but conditions were not comparable with those just described for the section just east of Elm Street.

Outside of these three areas only isolated cases of bad housing were found. Most of the houses in Manchester were frame dwellings of two and three stories and with adequate lot area. Wooden tenements and flat buildings were scattered all over the city, but the type which was being erected most frequently in all but the best residence portion of the city was the two-family and three-family house. It was cheaper to build than the attached houses, because the fire regulations required that every party wall, or wall between two apartments, must be of fireproof material, and this added to the cost of construction. The three-family house particularly was being built in large numbers, with one family to a floor. This style of building allows a more intensive use of the lot and when new is attractive and desirable in that it permits each family to have light and air on four sides. This condition holds, however, only so long as the adjoining lots are not built upon, and such houses tend toward lot crowding. They are also dangerous in case of fire, as the interior stairways running straight up from first floor to roof act as chimneys. Another common practice in Manchester was to build two houses upon one lot by placing one house to the rear and side so that a portion of the house had frontage on the street. It might or might not be attached to the one in front. Such houses for the most part had adequate light and air and were not counted as rear houses in this report, but houses so placed soon become objectionable and are likely to be shut in later.

The chief evils in the housing situation in Manchester have to do with maintenance. A new building code, passed in 1911, provides against the multiplication of some of the present evils in the construction of new houses, but there is no provision for the alteration of old houses, other than that buildings hereafter remodeled to an extent exceeding the cost of 50 per cent of the original building cost shall be made to conform to the requirements of the code. It also provides that no more frame buildings shall be erected within the fire limits, or if any building shall be damaged by fire to a greater extent than 50 per cent of its value it must be torn down. The new requirements make



construction more expensive, with the result that the old property pays a higher rate on the investment than new buildings could be made to do. The result is that the tearing down of old buildings is delayed, and, since there are no requirements as to the minor alterations or repairs, the condition in which they are maintained depends upon the interest and disposition of the landlord. In some cases the old wooden property has been left standing on the front of the lot and a new brick tenement has been built on the rear.

While tenement-house inspection was not organized, the board of health inspected for sanitary conditions upon complaint. It might order the premises cleaned or water-closets and cesspools cleaned and repaired, or it might order water-closets installed. As before stated, the law requires that all houses within 100 feet of a public sewer be connected, and that a water-closet for every 15 persons be maintained. The board of health also inspected plumbing fixtures when they were installed, to see that they conformed to the plumbing regulations. In 1913, the board stated in its report, 1,002 tenements, 95 vaults and privies, and 50 cesspools were inspected. It reported 21 tenements cleaned, 492 water-closets cleaned or repaired, 21 cesspools and 35 "filthy hallways and roofs" ordered cleaned, and 15 vaults and privies ordered cleaned or repaired. In addition, inspections were made of yards and alleys, cellars, outbuildings, and barns.

The building code provides that for new houses no room shall be built without windows opening either upon a court, yard, or the street, and that not more than 70 per cent of an inside lot or 90 per cent of a corner lot shall be occupied. Every apartment must have a water-closet with adequate means of ventilation. Also the window and floor area is prescribed for each room. Inner courts must be 12 feet in width and outer courts 8 feet for buildings three stories in height. This width must be increased with the increase in the height of the building over three stories, or may be decreased with each story less than three. But a court whose outer side is on the lot line need measure only 4 feet in width for a building three stories in height. Furthermore, the code does not forbid the erection of rear houses nor further encroachments upon the lot by other buildings, on the back or the front, so that the total percentage of the lot which can be occupied may be considerably in excess of 70.

The housing situation in Manchester may be briefly summarized: The city covers a broad area and a large proportion of the population lives in the open parts of the city. Near the center, however, in the areas verging on the business and mill sections, housing conditions were seriously bad. Lot congestion, dilapidated wooden tenements, rear and alley houses, and dark, insanitary dwellings prevailed. Tenement-house inspection was not systematic but was made upon complaint and was chiefly for nuisances.

## Schedule used in investigation.

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**PLATE I.—TENEMENT HOUSES IN THE FOURTH WARD, OUT TOWARD VALLEY STREET. MODERN PLUMBING, TOILET ON EVERY FLOOR, ALL SIDES EXPOSED TO LIGHT AND AIR. TYPE OF TENEMENT HOUSE BECOMING MORE COMMON IN MANCHESTER.**



**PLATE II.—REAR OF AN OLD HOUSE OCCUPIED BY TWO FAMILIES. BOTH USE SAME TOILET IN CELLAR.**



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PLATE VI.—REAR VIEW OF SOME THREE-STORY TENEMENT HOUSES.

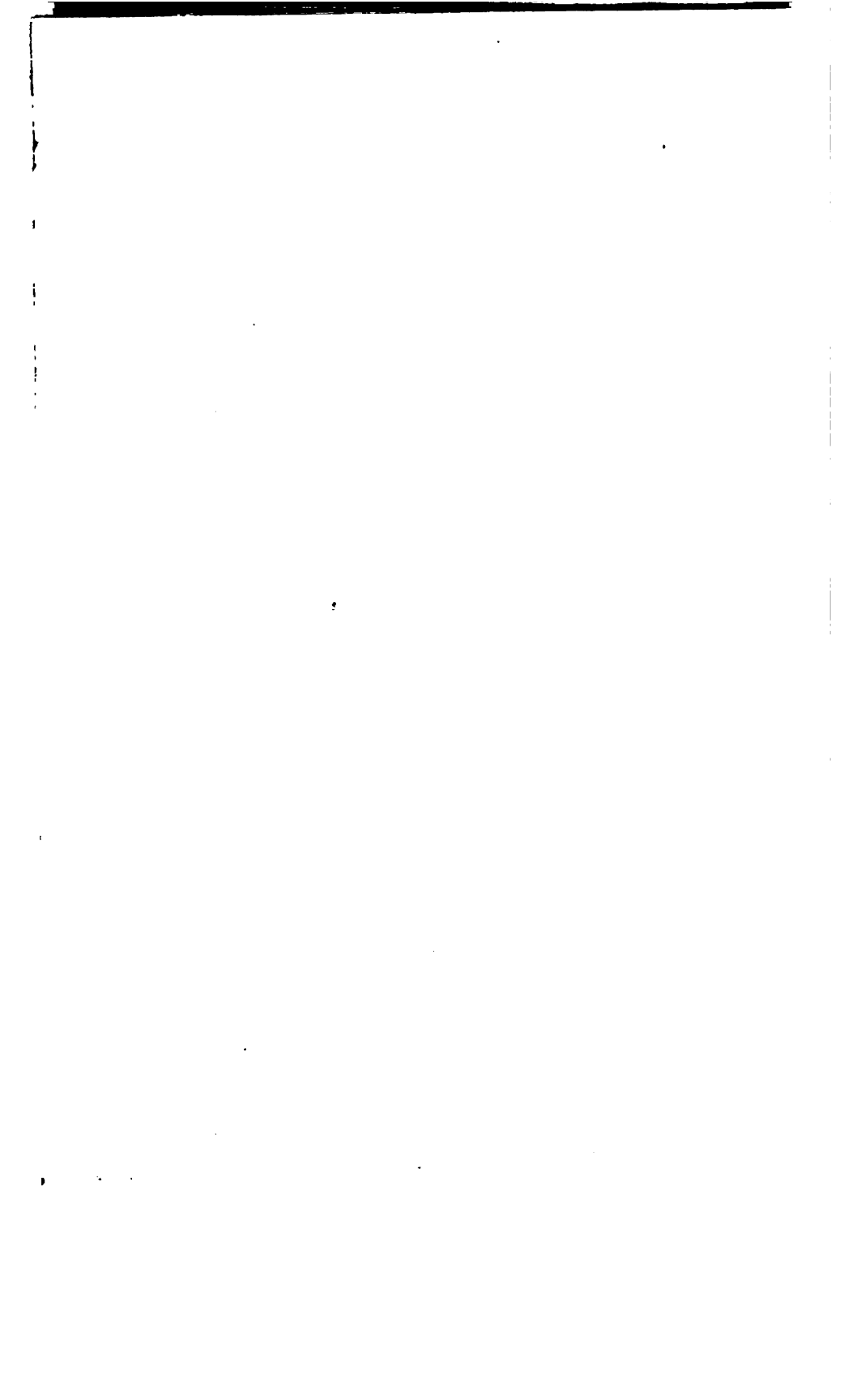


PLATE VII.—REAR VIEW OF TENEMENT HOUSES.



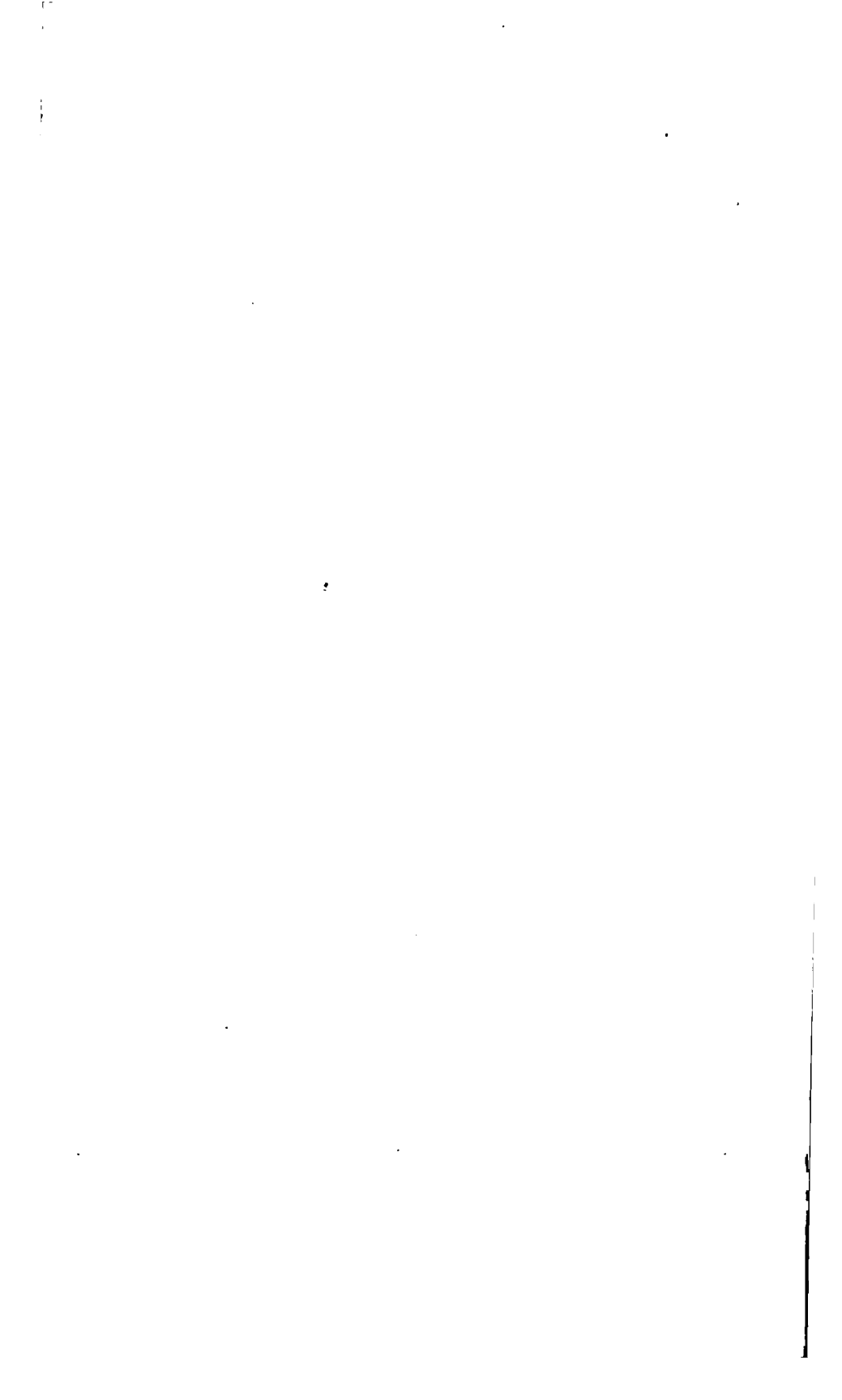
PLATE VIII.—REAR AND FRONT VIEWS.





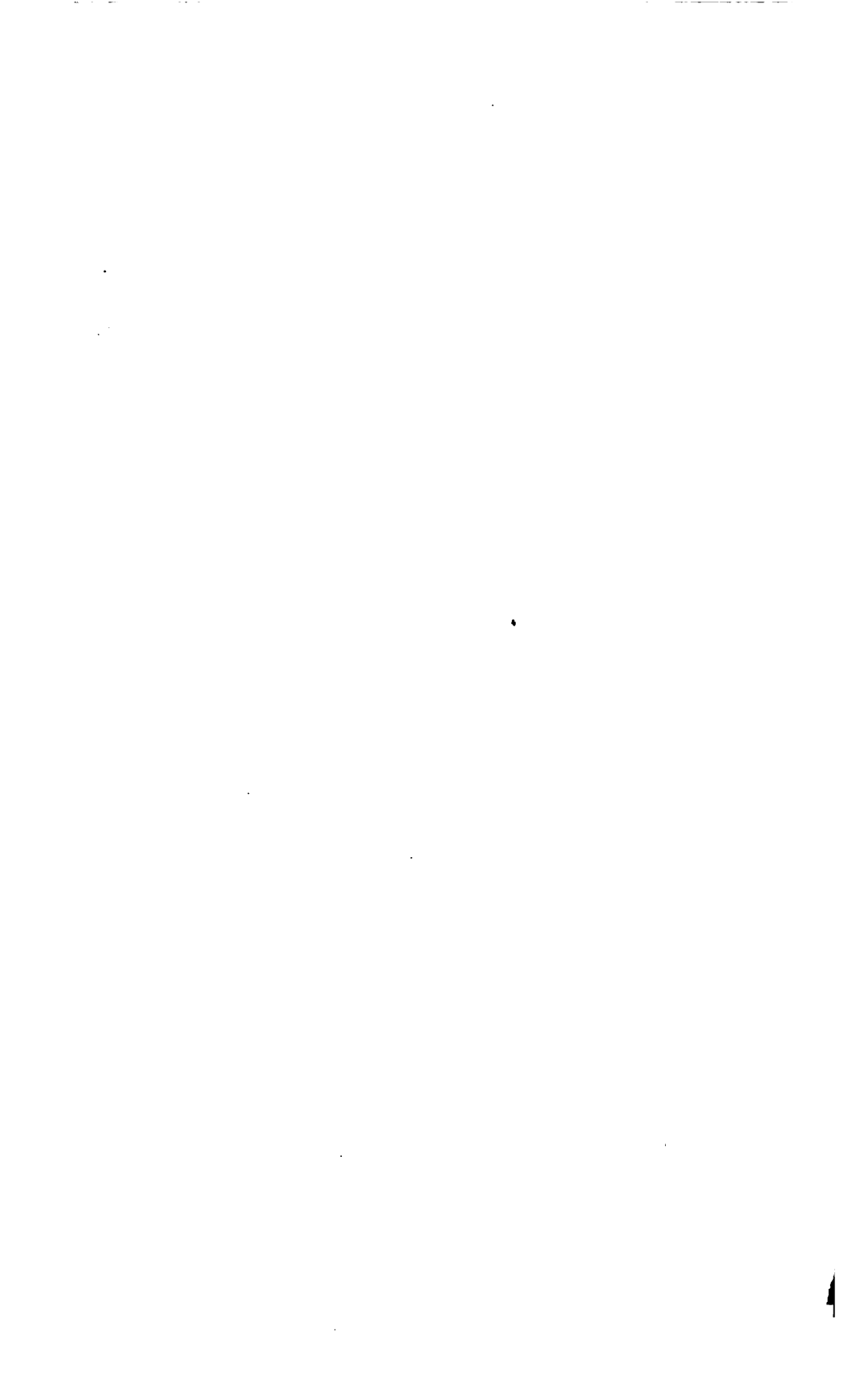


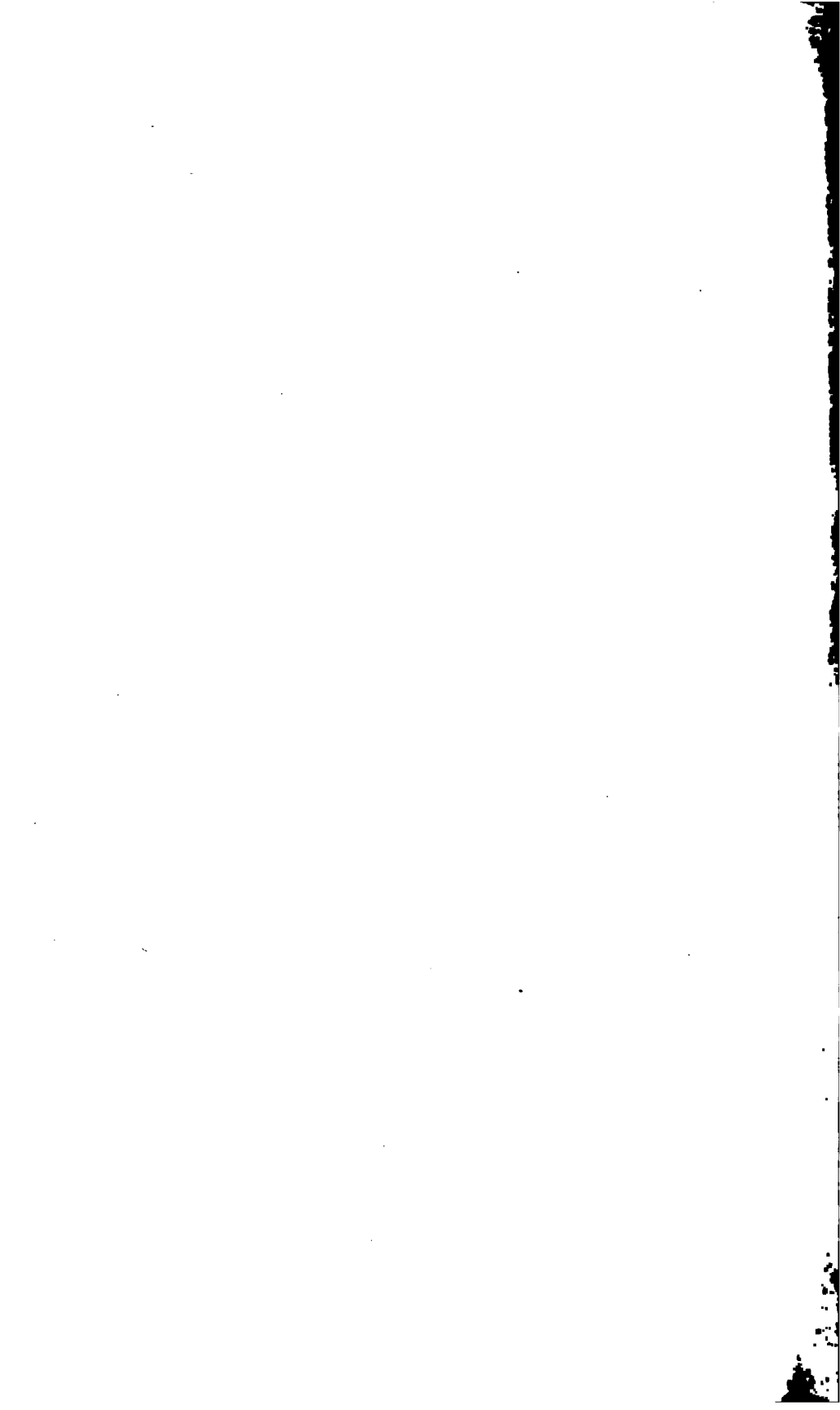












U. S. DEPARTMENT OF LABOR  
CHILDREN'S BUREAU  
JUDITH L. LATHROP, Chief

SUMMARY OF  
CHILD-WELFARE LAWS  
PASSED IN 1916

MISCELLANEOUS SERIES No. 7  
Fourth Publication No. 2



WASHINGTON  
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1917

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## LETTER OF TRANSMITTAL.

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U. S. DEPARTMENT OF LABOR,  
CHILDREN'S BUREAU,  
*Washington, February 3, 1917.*

SIR: I transmit herewith a summary of child-welfare laws passed in 1916. The summary relates new provisions to those which they supplement or supersede and gives exact legal references for all material included. The summary is based on an outline of topics which was originally prepared as the basis for the bureau's reference index of legislation in various States and which is appended to the summary.

The summary of current legislation was prepared by Miss Anna Rochester and Miss Lulu L. Eckman, with the assistance of Miss Ella A. Merritt. The outline index was planned by Miss Emma O. Lundberg, with the assistance of other members of the staff.

Respectfully submitted.

JULIA C. LATHROP, *Chief.*

Hon. WILLIAM B. WILSON,  
*Secretary of Labor.*



# SUMMARY OF CHILD-WELFARE LAWS PASSED IN 1916.

## INTRODUCTION.

Laws affecting the welfare of children were passed during the year 1916 by each of the 11 State legislatures holding a regular session,<sup>1</sup> by the legislatures of the Philippine Islands and Porto Rico, and by the Federal Congress. The acts of 11 extra sessions held in 10 States<sup>2</sup> between October 1, 1915, and December 1, 1916, have also been examined. This report summarizes the changes in child-welfare legislation found in these session laws<sup>3</sup> and compares the new provisions with those which they supersede and, in some cases, with related provisions in the same State. Exact legal references are given for each statement, but these references do not attempt to cover the entire field of the subject under discussion.

The main divisions of this summary follow the main divisions of the index outline of child-welfare legislation<sup>4</sup> prepared by the Children's Bureau, with certain modifications made necessary by the present less detailed plan of analysis. Thus the two subjects (E) Education laws and (F) Child-labor legislation, which the index outline separates, have been combined under the heading "Child labor and school attendance," and only such education laws have been included as directly affect employment, viz, those relating to compulsory school attendance, school census, length of school term, and attendance at part-time continuation schools. Laws which the index outline divides under three main headings—(G) State care of children, general provisions for administration, supervision, and maintenance; (H) Delinquent, dependent, and neglected children; and (I) Defective children—are given in the section entitled "Defective,

<sup>1</sup> Georgia, Kentucky, Louisiana, Maryland, Massachusetts, Mississippi, New Jersey, New York, Rhode Island, South Carolina, Virginia.

<sup>2</sup> California, Connecticut, Illinois (2 extra sessions), Massachusetts, Minnesota, Oklahoma, South Dakota, Tennessee, Vermont, Wisconsin.

<sup>3</sup> Two changes in child-welfare legislation—one in Louisiana and one in Maine—made effective by referendum vote between Oct. 1, 1915, and Dec. 1, 1916, have been included.

<sup>4</sup> For scope and text of this index outline, see Appendix, page 63. The subdivisions under the main headings are not arranged in the order in which they are found in the index outline.

delinquent, and dependent children." Two divisions of the index outline have been entirely omitted: (B) Guardian and ward, and (J) Minor's capacity or incapacity to acquire rights and to incur liabilities. In other divisions topics which are legal rather than social, or which concern adults primarily and children only indirectly, have not been included. For example, in the section entitled "Parent and child," changes are noted only in provisions regarding abandonment and neglect; abuse; care and support; custody of child; void and voidable marriages, with effect on legitimacy of child; adoption; and illegitimacy. Similarly, in the section on "Health and sanitation," no general health laws in which minors are not specifically mentioned have been included except provisions regarding venereal disease, infantile paralysis, visiting nurses, and town physicians (as distinct from health officers). But all laws concerning infant blindness, hospitals specified as for children or mothers, midwives, birth registration, and official divisions of child hygiene are covered. Recreation laws are placed in the section on health and sanitation, as in the index outline. Under the title "Defective, delinquent, and dependent children" only such laws relating to delinquents and dependents are included as specifically refer to minors, but all changes in provisions concerning mental defectives are summarized. In the last section, entitled "Miscellaneous provisions affecting children," are included a few laws not closely related to any of the subjects of the index outline.

The laws summarized under the heading "Child labor and school attendance" cover the same topics as those published by the Children's Bureau in the bulletin entitled "Child-Labor Legislation in the United States," and this review of 1916 laws may therefore be used as a supplement (in summary) to that volume. Three types of laws not given in the earlier publication, however, are included, viz: Provisions specifying a required length of annual school term are summarized; reference is made to provisions for investigations, a type of temporary legislation quite outside the scope of the other publication; and all provisions of workmen's compensation laws which specifically affect minor employees are indicated. The earlier bulletin referred only to such provisions of compensation laws as affected minors illegally employed; and those were not given in full, but summarized in the "Introduction." Even in the present summary changes in compensation laws which do not mention minor employees are not included, and none of the benefit provisions are mentioned.

A few local laws, i. e., State laws affecting a single county or city, etc., have been included, but neither the changes in local laws here summarized nor the references relating them to earlier local provisions cover this entire field. Appropriations are referred to



only as they are given in the text of an act establishing new work or creating a new office. Changes in appropriations for work already under way are not noted.

The topical index by States gives chapter references to the 1916 session law volumes.

#### ABBREVIATIONS USED IN REFERENCES.

[References giving chapter or number for a specified year are in every case to session laws of that year unless otherwise indicated.]

A	Act.
A C	Annotated Code.
art.	article.
C	Chapter, Chapters.
C L	Consolidated Laws.
C S	Compiled Statutes.
G L	General Laws.
No.	Number.
p.	page.
R L	Revised Laws.
s.	section.
ss.	sections.
St	Statutes.
Stat L	United States Statutes at Large.
Supp	Supplement.
W R L	Wolff's Revised Laws.
v.	volume.

#### LIST OF CODES, REVISIONS, OR COMPILATIONS USED.

United States	United States Statutes at Large.
District of Columbia	United States Statutes at Large.
Georgia	Code 1914.
Kentucky	Statutes 1915.
Louisiana	Wolff's Revised Laws 1904.
	Wolff's Revised Laws, Supplement 1904-1908.
Maryland	Annotated Code 1911 and 1914.
Massachusetts	Revised Laws 1902.
Mississippi	Code 1906.
New Jersey	Compiled Statutes 1910.
New York	Consolidated Laws 1909.
	Code of Civil Procedure.
Rhode Island	General Laws 1909.
South Carolina	Code 1912.
Virginia	Code 1904.

#### PARENT AND CHILD.

##### ADOPTION.

*New York.*—The law concerning adoption is amended to provide that in the adoption of an illegitimate child the fact of illegitimacy shall in no case appear upon the record. The amended law specifies

that if the foster parents reside outside the State proceedings must be in the county where the minor resides; otherwise, as formerly, in the county where the foster parents reside.

1916 C 453 amending C L 1909 (Domestic Relations) C 14 ss 112-114 as amended by 1915 C 352, and 115.

#### DESERTION OF MINOR CHILD.

See also Contributory delinquency, dependency, or neglect, pp. 32 to 33; Juvenile courts, Maryland, p. 36, and Massachusetts, p. 38; and Juvenile delinquents, Mississippi, p. 41.

*Kentucky.*—A parent willfully deserting an indigent child under 16 years of age is declared guilty of a felony, punishable by imprisonment for not less than one nor more than five years, but it is also provided that the parent, before or after conviction, may be placed on probation, subject to power of court, for a period of five years. By a former statute a parent guilty of willful nonsupport of child under 14 years of age is punishable by a fine of not more than \$20 or imprisonment in county jail or workhouse for not more than six months. Formerly parent deserting child under 6 years of age was subject to imprisonment in penitentiary for not more than three years. Compare provisions in juvenile-court law concerning parent contributing to dependency or neglect of minor.

1916 C 6. See St 1915 ss 328, 329, 331d, 331e.

*New Jersey.*—A mother who abandons a minor child dependent on her for support is declared guilty of a misdemeanor, but no penalty is specified. [The penalty for a misdemeanor unless otherwise specified is a fine of not exceeding \$1,000, or imprisonment for not exceeding three years, or both.] The act to which this is a supplement defined her as a "disorderly person." According to a former act a father deserting his minor child is held guilty of a misdemeanor and subject to fine of not more than \$100 or imprisonment for not more than one year. Compare the act for welfare of children [1915 C 246,—not referred to in the 1916 act], which provides that any parent abandoning or neglecting child or children is to be deemed guilty of "cruelty to or neglect of children" and subject to a fine of not exceeding \$100 or imprisonment for not more than one year in workhouse or penitentiary.

1916 C 45 supplementing C S 1910 v 2 (Disorderly Persons) ss 17-30 p 1931. See also C S 1910 v 2 (Crimes) s 73a p 1770 and 1915 C 246.

#### MISCELLANEOUS PROVISIONS CONCERNING PARENT AND CHILD.

*New York.*—The law providing for the annulment of a marriage contracted when one or both parties were under the age of legal consent is amended by adding the provision that an action may be

maintained when either or both parties had not attained the age at which the consent of parent or guardian was not required by the laws of the State where the marriage took place. The amendment specifically applies to marriages heretofore or hereafter contracted.

1916 C 605 amending Code of Civil Procedure ss 1743, 1744.

*Virginia.*—The father and the mother of a legitimate unmarried minor child are to be equally entitled to the custody, services, and earnings of the child. If either be dead or disabled, or if either refuses to take custody or has abandoned his or her family, the other is entitled to custody, services, and earnings. Formerly the father, if living, had custody of the child.

1916 C 417. See Code 1904 v 2 s 2603.

## OFFENSES AGAINST THE CHILD.

### OFFENSES AGAINST THE PERSON.

*Kentucky.*—Pandering is defined and prohibited. Any female involved in the acts so defined is declared a competent witness. A penalty of imprisonment in penitentiary for from one to five years is provided.

1916 C 49. For previous laws applying to abduction, seduction, and assisting in prostitution, not superseded unless in conflict with this act, see St 1915 ss 1156, 1158, 1214-1215a.

*Louisiana.*—Provision is made for indeterminate sentence for certain offenses, specifically including rape and attempt to commit rape, subject to the minimum and maximum terms defined in the statute under which the prisoner is convicted. The former statutes under which, apparently, a prisoner would be convicted provide death sentence for rape and imprisonment for varying periods for attempt to commit rape. [See references below.]

1916 A 123. Compare W R L 1904 v 1 p 320 (1855 A 120 s 4 as amended by 1873 A 24); and W R L 1904 v 1 p 325 (1855 A 120 s 9 as amended by 1896 A 59 and 1912 A 9). For other penalties for attempt to commit rape, see W R L 1904 v 1 p 369 (1870 Extra Session A 8); W R L 1904 v 1 p 322 (1892 A 26); and 1912 A 192 s 1.

*New York.*—Seduction of an unmarried female of previous chaste character under pretense of marriage is made punishable by imprisonment for not more than five years, or fine of not more than \$1,000, or both.

1916 C 196 amending C L 1909 (Penal) C 40 s 2175.

*Virginia.*—The age of consent is raised from 14 to 15 years.

1916 C 478 amending Code 1904 s 3680.

See also law [1916 C 168] forbidding employment agencies to send females to places of bad repute, given under "Child labor," page 27.

**MISCELLANEOUS OFFENSES AGAINST THE CHILD.**

*Louisiana.*—It is made unlawful for the owner of a junk shop, or his employee, to purchase goods from a minor under 17 years of age, and a penalty is provided.

1916 A 15.

*Maryland.*—Any proprietor of a public pool room, billiard room, or bowling alley in Garrett County or Washington County is forbidden to permit persons under 16 years of age to loiter on the premises, to participate in games, or to watch others play. Any minor under 14 years of age is also forbidden to frequent or use tables at any licensed billiard room in Allegany County.

1916 C 140, 205, 479.

*Porto Rico.*—The admission of any minor to the places within the hippodromes designated for betting is prohibited, and the sale to any minor of a slip or ticket for a bet is forbidden. The penalty for a first offense is a fine or from \$200 to \$500 or imprisonment for from one to three months, or both.

1916 No 42.

The sale or donation of cigars, cigarettes, or tobacco to children under 18 years of age is prohibited, with a penalty for first violation of a fine not to exceed \$100 or imprisonment for not more than 90 days or both fine and imprisonment.

1916 No 21.

*Virginia.*—The new prohibition law includes the provision that it is a misdemeanor for a minor to have liquor in his possession; the former law concerning the sale of intoxicants forbade furnishing or selling liquor to a minor, employing a minor in a saloon, and granting a license for the sale of liquor to a social club having minors among its members. The new law provides also that "wife, child, parent, guardian, employer, or other person who shall be injured in person or property or means of support by any intoxicated person" has a right of action against the person who, by selling, bartering, or giving away intoxicating liquors, shall have caused the intoxication.

1916 C 146 ss 41, 74. For former liquor law see 1910 C 190.

**HEALTH AND SANITATION, INCLUDING RECREATION.****BIRTH REGISTRATION.**

*Maryland.*—The vital statistics law is amended in several particulars. The amendments include the following changes: The State registrar is now permitted to combine two or more registration dis-

tricts in any county into one registration district without the former restriction that the population of the combined districts may not exceed 100,000; the city of Baltimore is now included in the provision, applying formerly to the remainder of the State, that originals of all certificates of birth or death shall be transmitted at least monthly to the State registrar.

1916 C 691 amending A C 1911 v 3 (1914) art 43 ss 8, 9, 12, 17.

*New York.*—The birth-registration law is amended by making the penalty apply specifically to any physician, midwife, or other person charged with filing a record of birth (formerly the penalty applied to "any person required by law" to report births, which included physician or midwife); and by adding the provision that action to recover penalty may be brought by State commissioner of health in any court of competent jurisdiction. [Another section of this law, not amended in 1916, provides that commissioner of health may report violations to district attorney, who shall institute proceedings.]

1916 C 58 amending C L 1909 (Public Health) C 45 s 392 as added by 1913 C 619.

#### HEALTH.

*Louisiana.*—It is made unlawful for a nurse or midwife to administer an anesthetic except by direction and under supervision of a physician. Violation of this provision is a misdemeanor subject to a fine of not exceeding \$1,000, or imprisonment for not exceeding six months, or both.

1916 A 163.

*Maryland.*—The county commissioners of Cecil County are authorized to appropriate not more than \$1,000 for the construction of a maternity department of Union Hospital of Cecil County, and to levy an annual tax for its maintenance.

1916 C 183.

*Massachusetts.*—The State department of health is authorized to purchase drugs of value in preventing the transmission of syphilis, for free distribution among boards of health, hospitals, dispensaries, and physicians, subject to such regulations as the department may prescribe.

1916 Resolves C 47.

Local boards of health, or the selectmen in towns having no boards of health, are authorized to make regulations to check the spread of infantile paralysis. Local authorities are required to notify the State department of health of any such regulation, and the State department of health has power to revoke or revise any regulation

under this act which it considers unnecessary or unreasonable. Regulations are to be in effect only until January 15, 1917.

1916 C 313.

Provision is made for an investigation by the State department of health of nonpulmonary tuberculosis with special reference to children and adolescents. This investigation is to determine the number of cases, the number of hospital beds now available for such cases and the number needed, and the department is to report to the legislature in January, 1917, its conclusions and recommendations with drafts of proposed legislation. Not exceeding \$500 may be spent upon the investigation.

1916 Resolves C 62.

*Mississippi.*—An act for the prevention of infant blindness is passed, which provides that all cases of inflamed or sore eyes occurring at any time within two weeks after birth shall be reported within six hours by the physician, midwife, parent, or other person in attendance to the local health officer, who shall investigate the cases and report to the State board of health. The State is required to furnish, if necessary, daily inspection and gratuitous treatment. The act provides also for the free distribution of a scientific prophylactic with directions for use to all physicians and midwives; and the use of a prophylactic in the eyes of the new born is required in all cases of childbirth in a maternity home, hospital, or institution, and in every case under the care of a midwife. The State board of health is required to publish information on the subject and to furnish copies of the law to all physicians and midwives and may make further regulations to be followed by local health officers. An appropriation of \$300 is made for the year 1916 and one of the same amount for the year 1917 for carrying out the provisions of the act. Failure to comply with any provision of the act constitutes a misdemeanor punishable by a fine of from \$50 to \$200.

1916 C 115.

*New Jersey.*—Municipalities are authorized to employ visiting nurses.

1916 C 202.

*New York.*—Any town containing a village which has no resident practicing physician within its boundaries or within a radius of 8 miles is authorized to appoint a town physician at a salary of not more than \$1,000, to be paid from tax money, whose duty it shall be to render medical relief to poor persons within the town. If the physician is also a local health officer, he is to receive in addition to this salary the compensation fixed for a health officer.

1916 C 413 amending C L 1909 (Town) C 62 by adding s 142.

*Philippine Islands.*—The sum of 1,000,000 pesos (\$500,000) is appropriated for a campaign to protect early infancy, to be conducted in cooperation with the Liga Nacional para la Protección de la Primera Infancia, and it is provided that officers and employees of the insular, provincial, and municipal governments, when so directed by the Governor General, shall serve gratuitously in connection with the work.

1916 No 2633.

*Rhode Island.*—The city of Providence is authorized to make an appropriation of \$5,000 toward the support of the Providence District Nursing Association.

1916 C 1405.

*South Carolina.*—The State board of health is instructed to appoint a county health officer for Greenville County at a salary of \$1,800, to be paid from the county funds. [Qualifications are not specified.] His duties include the examination of all children in the county under 12 years of age, unless they have been examined by a physician, to ascertain whether they have physical defects which might be remedied by treatment, and in case he discovers need of treatment the facts are to be communicated to the parents, guardian, or custodian of the child. The former health officer received a salary of \$1,000. His specific duties did not include examination of children.

1916 No 399 repealing 1914 No 300.

The State board of health is required to make the Wassermann test free of charge.

1916 No 531.

#### RECREATION.

*United States.*—Congress by special act incorporates the Boy Scouts of America, of which the purpose is stated as follows: To promote, through organization and through cooperation with other agencies, the ability of boys to do things for themselves and others; to train them in scoutcraft; and to teach them patriotism, courage, self-reliance, and kindred virtues, using the methods which are now in common use by Boy Scouts. The national organization was formerly a corporation under the laws of the District of Columbia.

39 Stat L C 148 p 227 (Act of June 15, 1916).

*Louisiana.*—In redrafting the school law provision is made [s 65] authorizing the Orleans Parish School Board to maintain playgrounds and social centers.

1916 A 120 repealing 1910 A 39 and 1912 A 214.

*Maryland.*—The mayor and city council of Baltimore are authorized to use the public-school buildings and other city property for any public purpose which will not materially interfere with the purpose for which such property was primarily designed.

1916 C 231 adding paragraph 32 to s 6 of Revised Charter of Baltimore city. See A C 1911 v 2 (1911) art 77 ss 121, 123.

In redrafting the school law for the State outside of Baltimore city, Maryland amends the provisions concerning the use of school buildings for other than school purposes by providing that when application is made by 25 citizens in the district for the use of a school building for a nonpartisan gathering for discussion of public questions, or for other civic, social, or recreational activities, the school authorities shall allow free use of buildings or grounds. The law formerly provided that school officials should "have authority to allow" such use.

1916 C 506 s 34 amending A C 1911 v 3 (1914) art 77 s 34.

*Massachusetts.*—The law permitting the use of school buildings in Boston for social and civic purposes is amended by eliminating the provision that in case of such use no admission fee shall be charged. This proviso had previously been eliminated from the law applying to the rest of the State.

1916 Special Acts C 86 amending 1912 C 195 s 1. Compare 1913 C 331 as amended by 1914 C 538.

*New Jersey.*—Any commission, board, or other local authority having control of parks, playgrounds, or other public property is specifically permitted to authorize their use for athletic purposes or as playgrounds, subject to reasonable regulation.

1916 C 59. For former provision concerning playgrounds managed by board of playground commissioners, compare 1911 C 308.

New Jersey adds to the provision permitting the use of school buildings and grounds for social and recreational purposes specific permission to improve and equip school property for such purposes.

1916 C 227 amending 1913 C 309.

*New York.*—A specific provision concerning land for athletic fields and playgrounds is added to the law concerning the acquisition by villages of lands for parks and squares. Villages are also authorized to equip and maintain parks, athletic fields, or playgrounds on leased land.

1916 C 42 amending C L 1909 (Village) C 64 s 169.

*Rhode Island.*—The school committee of Providence is authorized to permit the occasional use of school buildings for certain specified purposes, including civic, social, and recreational meetings and entertainments. No admission fee is to be charged unless the proceeds are



for an educational purpose connected with the school, and no political or religious meeting is to be permitted. Formerly the use of such buildings was permitted only for activities under auspices of school committee or board of recreation.

1916 C 1414. See 1912 C 858 and 1913 C 980.

## **CHILD LABOR AND SCHOOL ATTENDANCE.**

### **CHILD LABOR.**

*United States.*—Congress enacts a Federal child-labor law, to be effective September 1, 1917, forbidding the shipment in interstate or foreign commerce of the product of a manufacturing establishment or of a mine or quarry in the United States in which, within 30 days prior to the removal of the product from such establishment, mine, or quarry, children have been employed contrary to the following provisions: (1) No child under 14 to be employed at any time in any mill, cannery, workshop, factory, or manufacturing establishment; (2) no child between the ages of 14 and 16 years to be employed in establishments specified in (1) more than eight hours in any day, or more than six days in any week, or between 7 p. m. and 6 a. m.; (3) no child under 16 to be employed at any time in any mine or quarry. The Attorney General, the Secretary of Commerce, and the Secretary of Labor constitute a board to make regulations for carrying out the provisions of the act. The Secretary of Labor and his deputies have authority to inspect at any time establishments covered by the act. A dealer is protected from prosecution by establishing a guaranty issued by the manufacturer or producer. The producer, manufacturer, or dealer is protected from prosecution for violation if at the time of employment of the child the producer or manufacturer had in good faith procured and has since kept on file a certificate issued according to regulations of the board (of Secretaries), showing the child to be of such an age that shipment of the product was not prohibited. The board may designate States in which an employment certificate issued under State law shall be accepted as fulfilling this provision.

The district attorney is to cause proceedings to be commenced in a Federal court for the enforcement of the penalties provided by the act upon receiving a report of a violation from the Secretary of Labor or upon receiving satisfactory evidence of violation from any State factory or mining or quarry inspector, State medical inspector, school-attendance officer, or any other person.

The penalty for violation, including obstruction of entry or inspection authorized by the act, is as follows: For each offense prior to first conviction, a fine of not more than \$200; for each offense subse-

quent to first conviction, a fine of from \$100 to \$1,000, or imprisonment for not more than three months, or both.

39 Stat L C 432 p 875 (Act of Sept 1, 1916).

The Adamson Act provides that in contracts for labor and service eight hours shall be deemed a day's work and the measure or standard of a day's work for the purpose of reckoning compensation of all employees [whether minors or adults] actually engaged in the operation of trains used for the transportation of persons or property on interstate railroads, except railroads independently owned and operated not exceeding 100 miles in length, electric street railroads, and electric interurban railroads. The President is to appoint a commission of three to observe during a period of six to nine months the operation of the eight-hour day, and within 30 days thereafter the commission shall report its findings to the President and Congress. The sum of \$25,000 is appropriated for the necessary expenses of the commission. Pending their report and for 30 days thereafter the compensation of railroad employees subject to the act shall not be reduced below the present standard day's wage, and for all necessary time in excess of eight hours such employees shall be paid at a rate not less than the pro rata rate for such standard eight-hour workday. Violation of any provision constitutes a misdemeanor, punishable by fine of from \$100 to \$1,000, or by imprisonment not to exceed one year, or by both.

39 Stat L C 436 p 721 (Act of Sept 3, 5, 1916).

Congress amends the act limiting the hours of service for employees [whether minors or adults] upon interstate railroads to not more than 16 hours' continuous service with 10 consecutive hours off duty, by making the penalty for violation a fine of not less than \$100 nor more than \$500, instead of "not to exceed \$500," as formerly.

39 Stat L C 109 p 61 (Act of May 4, 1916) amending 34 Stat L C 2939 s 3 p 1415 (Act of Mar 4, 1907).

*Georgia.*—The commissioner of commerce and labor is given authority to appoint one factory inspector to aid in the enforcement of the child-labor law and such other laws as may come under jurisdiction of the department of commerce and labor. Formerly there was no specific provision for appointment of factory inspectors.

1916 No 547 p 113. See Code 1914 (Political) s 2141.

*Kentucky.*—The child-labor law is amended by the addition of a provision that "nothing in this act shall prevent" employment of children under 16 not residents of the State to perform in a duly licensed theater, provided the child is accompanied to and from the theater by a parent, guardian, or other adult custodian who remains in the wings during the performance. The law to which this proviso

is added forbade the employment of any child under 14 on the stage and provided that children 14 to 16 years of age must have regular employment certificates for all work in theaters and must not be employed in such work between 6 p. m. and 7 a. m.

1916 C 23 amending St 1915 s 331a.1. See also St 1915 ss 331a.2-331a.6.

*Louisiana.*—The law fixing a maximum 10-hour day and 60-hour week for females and for persons under 18 employed in specified occupations, and prohibiting night work for boys under 16 and girls under 18, is amended by eliminating the former exemption of stores and mercantile establishments for 20 days before Christmas. The former exemption of such establishments from these regulations on Saturdays is now limited to those employing more than five persons.

1916 A 177 amending W R L Supp 1904-1908 v 3 p 414 (1908 A 301 ss 4, 5).

Louisiana rewords and strengthens the law forbidding women and minors to serve in saloons and other specified places where liquors are sold.

1916 A 220 amending W R L Supp 1904-1908 v 3 p 872 (1908 A 176 s 5).

*Maine.*—The law passed by the legislature of 1915 limiting hours of work in specified occupations for all females and for boys under 16 years of age to 9 hours per day, with exceptions, and 54 hours per week, and prohibiting in the same occupations work of minors under 16 between 6 p. m. and 6.30 a. m., is adopted by referendum vote.

Referendum of Sept 11, 1916 adopting 1915 C 350.

*Maryland.*—An amendment to the child-labor law adds to occupations prohibited under 14 years of age work in mercantile establishments, stores, offices, boarding houses, places of amusement, clubs, and in the distribution or sale of merchandise. The minimum age for employment in these occupations was formerly 12, but another section of the child-labor law, still in effect, prohibited any employment under 14 during school hours unless child had fulfilled the legal requirements concerning school attendance. The minimum age in canning and packing establishments is left at 12 years. The new law adds to the occupations and processes prohibited under 16 years of age operating crosscut saws, or "any machine operated by power other than foot or hand power," and work in any establishment where "tobacco or tobacco products are prepared, manufactured, assorted, or packed" [instead of "in assorting, manufacturing, or packing tobacco," as formerly], and work in a theater or motion-picture establishment by omitting the former provision authorizing the chief of the bureau of statistics and information to issue to children under 16 years of age, at his discretion, permits for employment in connection with theatrical exhibitions. The age below which

females may not be employed at occupations requiring constant standing is lowered from 18 to 16 years.

The law permits the issuing of employment certificates by county issuing officials only in the county where the child resides, not, as formerly, also in the county where the child is employed; and it adds to the papers which the child must present before an employment certificate may be issued to him an employment ticket signed by the prospective employer stating the occupation, industry, and place in which child will work. The latter requirement was implied in the former law but was not specifically mentioned. Formerly there were no educational requirements for obtaining a vacation certificate; the new law specifies that the child must be able to read and write English.

The provision as to posting of hours is made more explicit but affects only establishments employing children under 16 instead of 18, as formerly. The requirement that lists of children of specified ages shall be posted is omitted.

The minimum age for newsboys in cities of 20,000 or over is raised from 10 to 12, except for boys over 10 already licensed, and a special badge and permit may be issued to boys over 10 for delivering papers on a regular route between 3.30 and 5 p. m. Formerly there was no restriction upon the age of boys serving routes outside of school hours. Street-trades permits and badges must be renewed one year from date of issuance instead of annually on January 1.

Certain minor changes are made in the office procedure to be followed by certificate-issuing officials.

The hours of work of all children under 16 in all occupations for which the minimum age is 14<sup>1</sup> are limited to 8 hours per day, 6 days per week, and 48 hours per week, and work in these occupations between 7 p. m. and 7 a. m. is prohibited. Formerly there was no regulation of hours of labor specifically applying to children under 16, except a 10-hour day in stores and mercantile businesses in Baltimore and in factories throughout the State, and a prohibition of night work from 8 p. m. to 8 a. m. for messengers under 16. [For 10-hour day for females in specified establishments and for all boys under 21 and females in certain factories, see A C 1911 v 3 (1914) art 100 ss 1-3, 51, 53-55.]

1916 C 222 amending A C 1911 v 3 (1914) art 100 ss 4, 5, 7-9, 11-16, 23, 25, 26, 28, 29-31, 37, 39-43, 46, 48, and adding s 22A to same article. Compare A C 1911 v 1 (1911) art 23 s 375; and A C 1911 v 3 (1914) art 27 s 239.

The provisions concerning the evidence of age required for employment certificates are amended. The law now provides that only a birth certificate, passport, or baptismal record will be ac-

<sup>1</sup> Including, among other establishments and occupations, factories, workshops, mechanical and mercantile establishments, and messenger service, but not canning and packing establishments.

cepted as documentary evidence, whereas formerly other documentary evidence was admitted. In case the specified evidence is not available the law now permits the issuance of a temporary permit, good for 10 days, pending inquiry by issuing officer as to available evidence and the acceptance of a physician's certificate of age. Formerly a child who was unable to present satisfactory documents could not secure any permit until after he had waited 10 days for a physician's certificate of age.

1916 C 701 amending A C 1911 v 3 (1914) art 100 s 13.

A State board of labor and statistics (three commissioners appointed by the governor) is created and is given all the duties and powers of the former bureau of statistics and information and of the former inspectors of female labor, both abolished by the same act. The board's duties include the administration and the enforcement of the child-labor law and of the law limiting the hours of work of women, but county school superintendents or their deputies retain the right to issue employment certificates outside of Baltimore city. One commissioner is designated by the governor as chairman of the board and receives a salary of \$2,500; the other two receive \$500 each. The board is authorized to appoint deputies, inspectors, assistants, and employees subject to the approval of the governor.

1916 C 406 amending A C 1911 v 2 (1911) art 89 ss 1, 2, adding ss 2A and 11-15 to same article, and repealing A C 1911 v 3 (1914) art 100 s 53; 1916 C 407 amending A C 1911 v 3 (1914) art 27 s 240.

The 10-hour law for females employed in specified occupations is amended by omitting the former special provisions concerning seasonal industries in Allegany County, and by adding a new exemption permitting women employed in retail mercantile establishments outside of Baltimore city to work 12 hours on Saturdays and on Christmas Eve and the five preceding working days, provided that on each of those days they have at least two rest intervals of one hour each and provided they do not work more than 9 hours a day during the remainder of the year. This act affects only females 16 years of age and over, as girls under 16 are covered by the provisions of 1916 C 222 [summarized on page 21].

1916 C 147 repealing and reenacting A C 1911 v 3 (1914) art 100 s 51.

*Massachusetts.*—Provision is made for the issuance of summer vacation employment certificates to children between 14 and 16, subject to the regulations of child labor and to all the requirements for general employment certificates except completion of the fourth grade, which is the educational qualification required for general employment certificates.

1916 C 66 amending 1909 C 514 s 59 as amended by 1913 C 779 s 17 and 1914 C 580.

Special employment certificates are to be issued by the local superintendents of schools to children between 14 and 16 years of age who are attending cooperative courses. These are defined as courses approved by the board of education and conducted in public schools, in which technical or related instruction is given in conjunction with practical experience by employment in a cooperating factory, or manufacturing, mechanical, or mercantile establishment, or workshop. [Contents of certificates are not specified.] Further, pupils in cooperative courses are exempted from the provision requiring a certificate of literacy or attendance at evening school for employment of minors between 16 and 21 years of age.

1916 C 95 amending 1909 C 514 s 17 as amended by 1912 C 191; s 57 as amended by 1913 C 779 s 15; and s 66 as amended by 1913 C 779 s 23.

Massachusetts amends the law fixing a maximum 10-hour day and 54-hour week for women and children under 18 in manufacturing, mechanical, mercantile, and other specified establishments, with certain exceptions and exempting manufacturing establishments where employment is by seasons, by providing that the State board of labor and industries shall determine what employments are seasonal.

1916 C 222 amending 1909 C 514 s 48 as amended by 1915 C 57.

It is provided that in cities [of 50,000 or less population] all children under 16, instead of only those under 14 as heretofore, are to be under the jurisdiction of the school committee with respect to obtaining permits for boot blacking, newspaper selling, and other specified street trades. A special street-trades law applying to cities of over 50,000 population had, before 1916, placed with school officials the licensing of street traders under 16 years of age in such cities. [Cities having over 50,000 population by the Federal census of 1910: Boston, Brockton, Cambridge, Fall River, Holyoke, Lawrence, Lowell, Lynn, New Bedford, Somerville, Springfield, Worcester.]

1916 C 242 s 4 amending R L 1902 C 65 s 17 as amended by 1910 C 419; 1916 C 242 s 5 amending R L 1902 C 65 s 18. For street-trades law applying to cities of over 50,000, see 1913 C 831 ss 11-15, 19, 22-25.

An act providing for special one-day licenses for street selling and soliciting on behalf of a charitable organization states that no person under 16 shall serve as the accredited agent of such organization.

1916 C 188.

The act establishing a minimum-wage commission is amended to provide that one of the three members shall be an employer of female labor and that one member may be a representative of labor. The only former provision as to the personnel of the commission, that one member may be a woman, is retained.

1916 C 303 amending 1912 C 706 s 1.

The State board of labor and industries is directed to investigate hours and conditions of labor in hotels and restaurants and to report in January, 1917, upon the advisability of legislation providing for one day's rest in seven for hotel and restaurant employees. These are specifically exempt from the existing law requiring one day's rest in seven for employees, with certain exceptions, in manufacturing and mercantile establishments.

1916 Resolves G 74. Compare 1913 C 619.

The special commission on social insurance<sup>1</sup> [appointed by 1916 Resolves C 157] is directed to study and report on hours of labor in continuous industries and to present drafts of such laws as it may deem expedient to recommend.

1916 Resolves C 164.

*Mississippi.*—The 10-hour law applying to all persons employed in manufacturing or repairing establishments is amended by permitting 30 minutes (instead of 20 minutes) overtime the first five days of the week, provided such overtime is deducted from the working hours on Saturday. The law as amended provides further that persons working only at night may work 11½ hours each night from Monday to Friday and 3¾ hours on Saturday night and specifically exempts employees of railroads or public-service corporations. This law does not apply to all minors employed in manufacturing or repairing establishments, since other acts further regulate hours of boys and girls under specified ages in certain occupations.

1916 C 239 amending 1912 C 157 s 1 as amended by 1914 C 169. See 1908 C 99 as amended by 1912 C 165 and 1914 C 163, 164, 165.

*New Jersey.*—Provision is made for the issuance of special employment certificates by the commissioner of education and the commissioner of labor for pupils above the age of 14 years attending vocational schools and working part time in factories, workshops, mills, and all places where the manufacture of goods is carried on, designated by the board of education. [Contents of certificates are not specified.] A proviso, the significance of which is not clear, states that "nothing in this act shall be construed to permit children to be employed for more than eight hours in any one day or more than six days in any week and in accordance with the provisions of chapter 252, P. L. 1914." The earlier act referred to contains the provisions fixing a minimum age of 14 and maximum hours of eight per day in factories and a minimum age of 16 in certain dangerous occupations, and requiring employment certificates.

1916 C 242 supplementing C S 1910 v 3 (Labor) ss 16-25 p 3023 as amended by 1914 C 60, 236, 252. Compare 1913 C 294.

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<sup>1</sup> See p. 57.

The department of labor (whose duties include the enforcement of the child-labor law) is reorganized with eight bureaus, including a bureau of inspection and a bureau of hygiene and sanitation.

1916 C 40 and 54. Compare C S 1910 v 3 (Labor) s 60 p 3034 as amended by 1912 C 117, C S 1910 v 3 (Labor) s 61 p 3035, and 1914 C 236 s 3 for provisions concerning former organization of the department with reference to enforcement of the child-labor law.

*New York.*—The employment-certificate provisions of the child-labor law are amended, amendments to take effect February 1, 1917. A child who is 14 years of age but under 15 may not receive an employment certificate unless he has completed the course of the public elementary schools or its equivalent. Children 15 but under 16 may receive certificates if they have completed only the sixth grade as formerly required for children of both 14 and 15. The former specific permission to accept a certificate of graduation as evidence of age is omitted. The officer issuing certificate upon documentary evidence of age other than birth certificate, graduation certificate, passport, or baptismal certificate was formerly instructed to file with the local board of health for its approval a signed statement showing the facts "together with such affidavits or papers as may have been produced before him constituting evidence"; the words "affidavits or" are now omitted. Formerly the evidence had to be approved by the board of health at a regular meeting; now the commissioner of health, or, if officially authorized, the issuing officer himself may approve the evidence, a record of which must be entered on the minutes of the next meeting of the board. As before, in first-class cities [New York City, Buffalo, and Rochester], if no satisfactory documentary evidence of age can be produced, a physician's certificate as to age may be accepted as evidence, but the waiting period after an application for such a certificate is reduced from 90 to 60 days. The literacy requirement which the issuing officer must state that the child has satisfied is changed from "to read and legibly write" simple English sentences to "to read and write correctly" simple English sentences.

1916 C 465 s 1 amending C L 1909 (Labor) C 31 s 71 as amended by 1912 C 333; 1916 C 465 s 2 amending C L 1909 (Labor) C 31 s 163 as amended by 1913 C 144. See also C L 1909 (Labor) C 31 ss 73, 165, both as amended by 1913 C 144.

New York provides that posing in connection with making of a motion-picture film is prohibited to a child under 16 unless a special permit is secured from mayor of city or president of board of trustees of village. Formerly this provision for permit applied only to children under 16 employed in theatrical exhibitions or as musicians in concerts. The application for permit for a child to be employed in making of a motion-picture film must be accompanied by detailed statement of just what the child is to be required to do.

1916 C 278 amending C L 1909 (Penal) C 40 s 485.



*Rhode Island.*—It is provided that a child's employment certificate shall be kept on file at the issuing office until that office receives a written statement from the employer agreeing to employ the child lawfully and to return the certificate to the issuing office within five days after termination of employment. The certificate shall be then delivered to the employer and in no case to the child. Formerly the certificate was delivered to the child upon issuance, and, if he so demanded, given back to him by the employer upon termination of employment. The compensation for each of the two physicians appointed to examine applicants for certificates in Providence is increased from \$750 to \$1,200 per annum.

1916 C 1358 and 1378 both amending G L 1909 C 78 s 1 as amended by 1915 C 1253.

*South Carolina.*—The minimum age for employment in a factory, mine, or textile establishment is raised from 12 to 14 years. [The section of the former act which required work permits for children under 14 is not changed, and the amended act includes no provision for work permits for children 14 and over.]

1916 No 361 amending 1912 Criminal Code C 16 s 422. See also 1912 Criminal Code C 16 s 426.

The law fixing maximum hours of not more than 11 per day and 60 per week for work in cotton and woolen manufacturing establishments, except for certain employees [mechanics, engineers, firemen, watchmen, teamsters, yard employees, or members of clerical force], is amended by placing restrictions upon the making up of lost time and by adding a new provision for posting regular hours and special hours to be worked under exemption clauses.

1916 No 547 amending Criminal Code 1912 C 16 s 421.

South Carolina limits to 10 hours per day the work of any employee [whether minor or adult] of an interurban railway operating 40 miles or less, and permits exemption in case of accident or unavoidable delay.

1916 No 544.

*Virginia.*—Among the amendments to the law regulating employment agencies is the provision that any bureau or agency which knowingly sends any female to any place of bad repute shall be deemed guilty of a felony, punishable by fine of from \$100 to \$1,000, or imprisonment of from 1 to 10 years, or both fine and imprisonment. [Compare with other provisions according to which any person over 18 years of age who sends or causes to be sent any child under 18 to any house of prostitution is guilty of a misdemeanor and subject to fine of not more than \$500, or imprisonment not exceeding one year, or both.]

1916 C 168 amending 1910 C 155. Compare 1914 C 350.

For provisions making unnecessary the law prohibiting employment of a minor in a saloon [1910 C 190], see new law prohibiting sale of liquor [1916 C 146, summarized on page 14].

#### COMPENSATION FOR INJURED MINOR.

*United States.*—Congress, in the workmen's compensation act applying to Federal employees, enacted in 1916, provides [s 6] that "in the case of persons who at the time of the injury were minors \* \* \* and who were not physically or mentally defective, the commission shall, on any review after the time when the monthly wage-earning capacity of such persons would probably, but for the injury, have increased, award compensation based on such probable monthly wage-earning capacity."

39 Stat L C 458 p 742 (Act of Sept 7, 1916).

*Kentucky.*—A workmen's compensation law is passed which includes the following provisions: A minor, unless employed in willful violation of a State law regulating employment of minors, shall be deemed sui juris for purposes of the act, and no other person shall have cause of action by reason of the employee's minority, but in the event of the award of lump-sum compensation to such minor payment shall be made to his guardian. In case of a minor employed in willful and known violation of a State law, his statutory guardian or personal representative may claim compensation under terms of the act or may sue to recover damages as if the act had not been passed.

1916 C 33 ss 11, 30.

*New York.*—In the revision of the workmen's compensation law it is provided [s 2 of amended act] that a minor employee shall be deemed sui juris for the purposes of election as to accepting provisions of the act.

1916 C 622 amending 1913 C 816 as reenacted by 1914 C 41.

*Porto Rico.*—A workmen's compensation law is passed which specifically provides [s 32] that a child or a woman who is employed is on the same footing as a man in regard to the provisions of the act.

1916 No 19.

#### SCHOOL ATTENDANCE.

*Georgia.*—School attendance is required of all children between the ages of 8 and 14 years for four months each year, beginning with opening of the first term, but exemptions are permitted under the following conditions: (1) If child has completed the fourth grade; (2) if because of poverty his services are necessary for the support of a parent or other member of his family dependent on his services;

(3) if the parent is too poor to provide textbooks and clothing; (4) if child's mental or physical condition renders attendance inexpedient; (5) if there is no school within 3 miles; or (6) if "for other good reason (the sufficiency of which shall be determined by the board of education of county or city or town in which child resides) the said board excuses the child from such attendance." School boards are specifically authorized to take into consideration the seasons for agricultural labor and the need for such labor in authorizing the excuse of children in farming districts. A parent, guardian, or other person willfully failing to send child to school is guilty of misdemeanor and may be punished by fine not exceeding \$10 for first offense and \$20 for each subsequent offense. Punishment may be suspended by court if parent immediately places child in school. It is the duty of the principal or teacher in charge to report monthly to board of education having supervision of school on attendance of pupils, and the duty of the county or municipal board of education to investigate attendance and nonattendance and to institute proceedings for violations of act. No provision is made for attendance officers. Heretofore Georgia had no compulsory school-attendance law.

1916 No 576 p 101.

*Kentucky.*—In the revision and codification of the common-school law provision is made for a biennial school census instead of an annual one, as formerly.

1916 C 24 repealing and reenacting certain sections of St 1915 C 113 (ss 4363-4535h). Compare 1916 C 24 ss 90, 94, 207 with St 1915 ss 4426a.5, 4432, 4449, 4523. See also St 1915 ss 2978a.35, 2978c.10.

The title of the chief truant officer in first-class cities [Federal census of 1910, Louisville only] is changed to director of attendance, and the supervision of the school census in his city, under direction of board of education, is included in his duties.

1916 C 121 amending St 1915 s 2978c.6.

*Louisiana.*—A compulsory school-attendance law applying to the entire State except the parish of Orleans is passed. The law formerly applying outside of the parish of Orleans affected only cities of over 25,000 inhabitants. It required school attendance of children between 8 and 14 years of age with exceptions. The new law requires the attendance of every child between 7 and 14 years of age, both inclusive, for a minimum of 140 days, or for the entire session if that is less than 140 days. Children must enter not later than two weeks after the beginning of the term. Children who in the judgment of the parish school board are within the following classifications are exempted: (1) Children mentally or physically inca-

pacitated; (2) those who have completed the elementary course; (3) those who live more than  $2\frac{1}{2}$  miles from a school of suitable grade and for whom free transportation is not furnished by the school board; (4) those for whom adequate school facilities are not provided; and (5) those whose services are needed to support a widowed mother. The law specifies a penalty for the parent in case of violation, but provides that nonattendance due to truancy of child instead of to neglect of parent shall be considered delinquency, and that in such cases the child shall be brought before the juvenile court. The new law, like the old, contains no provision for enforcement or for appointment of attendance officers. The compulsory school-attendance law for the parish of Orleans, which is not affected by the legislation of 1916, applies with certain exemptions to children 8 to 14 years of age, inclusive, and to those from 14 to 16 who are not regularly and lawfully employed at least six hours daily. It provides for the appointment of attendance officers and has no poverty exemption clause.

1916 A 27 repealing 1914 A 91. See also 1910 A 222 as amended by 1912 A 232.

*Maryland.*—The laws relating to public education are amended and codified. The following amendments and additions are included:

The State board of education shall prescribe, with advice of the State superintendent of schools, the rules and regulations for taking a biennial school census of all children 6 to 18 years of age, inclusive. This census shall be taken under the direction of county boards of education and county superintendents. The only former school-census provision, requiring in Baltimore city an annual census of all children 6 to 18 years of age, inclusive, is not changed by the new law. The State superintendent of schools may cause the census of Baltimore city or of any county to be retaken if he believes it has not been correctly taken.

At least one attendance officer shall be appointed in each county by the county board of education on nomination of the county superintendent and subject to the written approval of the State superintendent. The law formerly permitted but did not require the appointment of attendance officers except in Baltimore city. The Baltimore provisions are not changed by the 1916 law.

Elementary schools for white children shall be kept open for not less than 180 school days, and, if possible, for 10 months each year. The law formerly required "for 10 months each year if possible." The minimum annual term for colored elementary schools is fixed at 140 school days, or 7 months. There was formerly no minimum term for colored schools.

The school-attendance requirements outside of Baltimore city are amended. It is now provided that every child "being 7 years of age and under 13 years of age" shall attend school the entire session. Every child 13 or 14 years of age shall attend at least 100 days, beginning not later than November 1, and if such child is not regularly and lawfully employed at home or elsewhere he (or she) shall attend school the entire session. Every child 15 or 16 years of age is subject to the same provisions as those applying to children 13 or 14, except that a child 15 or 16 who has completed the work of the elementary school is exempt. None of these provisions apply to children whose mental or physical condition renders school attendance inexpedient. Any person having a child under his control who fails to comply with these provisions shall be guilty of a misdemeanor and fined not more than \$5. The former school-attendance provisions outside of Baltimore city, which were less comprehensive and from which six counties were specifically exempted, applied only to counties where the board of county school commissioners had adopted them and had appointed an attendance officer. On April 1, 1916, the old provisions were in force in nine counties.

1916 C 506 amending A C 1911 v 2 (1911) art 77 and A C 1911 v 3 (1914) art 77; amended sections include ss 43, 73, 75, 131, 153A (now 162), 156; certain sections including ss 12F, 21B, 25M are added. Compare A C 1911 v 3 (1914) art 77 ss 153, 159.

*Massachusetts.*—Provisions concerning the school census are amended to make the attendance officers responsible for its accuracy and completeness. Private schools are required to report registrations to the city or town superintendent of schools. A definite method for using school census in enforcing compulsory school attendance is prescribed. The school committees' reports to the commissioner of education shall state the number of minors of specified ages as of the 1st day of April instead of the 1st day of September.

1916 C 102 amending R L 1902 C 43 ss 3, 4, both as amended by 1914 C 443.

Married women are exempted from the provision requiring all illiterate minors 16 to 21 years of age to attend evening or other school.

1916 C 82 amending 1913 C 467 s 1.

*Mississippi.*—A special commission is to be appointed to study school laws of other States and other countries and to compile a complete code of school laws to be submitted to the Mississippi Legislature in January, 1918. [The Mississippi laws include no provisions for school census or for compulsory school attendance.]

1916 C 603.

**DEFECTIVE, DELINQUENT, AND DEPENDENT  
CHILDREN.****CONTRIBUTORY DELINQUENCY, DEPENDENCY, OR NEGLECT.**

See also Desertion of minor child, p. 12; Juvenile courts, Maryland, p. 36, and Massachusetts, p. 38; and Juvenile delinquents, Mississippi, p. 41.

*Louisiana.*—Contributory delinquency, dependency, or neglect on the part of parent, guardian, or other person having custody or control of a child under 17 is defined, and it is provided that any person coming under that definition shall be deemed guilty of a misdemeanor and shall be punishable by a fine of not more than \$1,000, or by imprisonment for not more than one year, or both. [According to the State constitution, art. 118, the juvenile court, parish of Orleans, and district courts outside of said parish, sitting as juvenile courts, have jurisdiction over "all persons charged with contributing to the neglect or delinquency of children under 17 years of age." This article contains, however, no special definition of contributory neglect, etc., and provides no penalty therefor.]

1916 A 139.

*Maryland.*—The procedure to be followed in case of a parent, guardian, or other person having custody, control, or supervision of a child defined by law as "a minor without proper care or guardianship" is specified, and it is expressly provided that the act shall be liberally construed in favor of the State for the protection of a child not only from neglect on the part of the parents or guardians but "from the effects of the improper conduct or acts of any person which may cause, encourage, or contribute to dependency, neglect, or delinquency of such child, or to the conditions which render it a minor without proper care or guardianship, although such person is in no way related to such child." Jurisdiction is given to circuit courts in counties; in Baltimore city the preliminary hearing at which all persons named in the petition are present [apparently including the minor] is to be before the magistrate for juvenile causes, and this magistrate has concurrent jurisdiction with the criminal court of Baltimore city if the accused waives his right to trial by jury. The court is given wide discretion in dealing with cases of contributory delinquency, etc.; it may place the adult on probation, or impose a fine not exceeding \$500, or sentence to imprisonment in house of correction for not exceeding two years, or impose both fine and imprisonment. This act shall not prevent proceedings under any other statute which is applicable, and gives the court authority to direct the State's attorney to prosecute under criminal laws.

State-wide provisions earlier than 1916 specifically concerned with adult's contributory delinquency, dependency, or neglect related only

to father's desertion of wife and minor child and to parent's abandonment of child under 3 years of age. Contributory delinquency, dependency, or neglect was previously defined and declared a misdemeanor in certain local juvenile-court laws, and is so declared and defined in the new juvenile-court act, State wide except for Baltimore city [summarized on page 36].

1916 C 674. See A C 1911 v 3 (1914) art 27 ss 75-78. For certain local laws see 1914 C 171, 367, 701. Compare also 1916 C 326.

### DEAF, DUMB, AND BLIND.

*Kentucky.*—The name of the Kentucky Institution for Education of the Blind is changed to the Kentucky School for the Blind.

1916 C 84. See St 1915 ss 290-311.

*Louisiana.*—The State schools for the deaf and dumb and for the blind which were formerly under separate special boards are placed under the control of the State board of education.

1916 A 237. Compare W R L 1904 v 1 p 576 (1908 A 145) as amended by W R L Supp 1904-1908 v 3 p 201 (1908 A 238 s 1); and W R L 1904 v 1 p 579 (1908 A 166) as amended by W R L Supp 1904-1908 v 3 p 202 (1908 A 239 s 1).

The governor is authorized to appoint a nonsalaried commission of five residents of the State to consider the advisability of establishing an institution for the care and training of colored deaf, dumb, and blind persons. If commission recommends establishment of institution, its report shall include details as to location, cost, and working plans.

1916 A 72.

*Massachusetts.*—Provision is made for the interchange of information concerning needy blind persons between the Massachusetts Commission for the Blind and the State board of charity, and the city and town overseers of the poor throughout the State. The former provision requiring the bureau of statistics to report to the commission all blind persons found in the decennial census is retained. Further, the law now authorizes the commission to keep a register, not only of blind persons, as formerly, but of persons who have seriously defective sight, and to take measures, in cooperation with other authorities, for the prevention of blindness and for the education and vocational guidance of persons having defective sight.

1916 C 160 amending 1906 C 385 s 2 and adding s 2A to same chapter. See also 1907 C 173 and compare 1916 Resolves C 75.

The commission on economy and efficiency is directed to investigate the advisability of providing pensions for needy blind and to report to the legislature in January, 1917.

1916 Resolves C 139. Compare 1906 C 385 s 6,

*New Jersey.*—The commission for ameliorating the condition of the blind is authorized to make inquiries concerning the causes of blindness, to learn what proportion of the causes of blindness are preventable, and to cooperate with the State board of health and other officials in adopting and enforcing preventive measures. Formerly the commission had power only to report and recommend methods of preventing blindness.

1916 C 22 amending C S 1910 v 2 (Deaf-mutes, Blind, and Feeble-minded) ss 41-43 p 1903 as amended by 1911 C 82.

The commission for ameliorating the condition of the blind is authorized to lend State money to provide capital and tools for blind persons who wish to earn a living by any form of business or productive activity.

1916 C 17.

A former act appropriating a specified per capita sum for the care and instruction of certain dependents, including blind persons, in institutions is amended to include the provision that blind babies and young children too frail or backward to enter institutions for the blind shall have necessary hospital care, and the per capita allowance for these children is fixed at \$450 instead of \$300.

1916 C 134 amending C S 1910 v 2 (Deaf-mutes, Blind, and Feeble-minded) s 1 p 1896 as amended by 1915 C 297.

#### DEPENDENT CHILDREN.

See also Juvenile courts, pp. 35 to 40; Juvenile delinquents, Mississippi, p. 41; Mothers' pensions, pp. 51 to 52; and Miscellaneous provisions affecting defective, delinquent, and dependent children, pp. 52 to 53.

*Mississippi.*—The board of supervisors [of each county] is authorized to commit dependent children to any orphan asylum in the State or to any organization in the State caring for dependent children, and to appropriate from the county funds not more than \$100 to pay the expenses of placing a child. The law also retains the provision authorizing the board to bind out poor children, which was formerly the only method of handling such cases. The board of supervisors has power to change the commitment of any child, and also, as formerly, to revoke articles of apprenticeship. The law now requires that every master of apprentices to whom a child has been bound out and every asylum or organization to which a child has been committed shall report annually to the board concerning the welfare of each child. The age above which healthy children may not remain at a poorhouse is reduced from 10 to 7.

1916 C 227 amending Code 1906 ss 3582, 3584-3586.

*New York.*—The administration of county charities and corrections in Westchester County is reorganized and provision is made for



a department of child welfare, with a director whose duties shall be prescribed by the county commissioner of charities (an office created by this act) and the county board of supervisors.

1916 C 242. See C L 1909 (Poor) C 42 art 2, 3, 4 (especially ss 5, 6, 146), 5; Code of Criminal Procedure s 910; C L 1909 (State Charities) C 55 s 450; 1911 C 843.

The law permitting the county board of supervisors to abolish or revive the distinction between town and county poor is amended by a provision specifying that such action may be taken for persons over 16 years of age only or for persons 16 years and under only, or for all persons. Formerly in abolishing or reviving the distinction between town and county poor no difference in the treatment of the two age groups was permitted.

1916 C 379 amending C L 1909 (Poor) C 42 s 138.

*Virginia.*—The former provisions requiring maternity hospitals and persons receiving or boarding children to obtain licenses issued by the local boards of health on the recommendation of the State board of charities and corrections are extended to include persons receiving children under 17 years of age, instead of only those under 5 years as formerly.

1916 C 436 amending 1912 C 43.

#### JUVENILE COURTS.

See also Juvenile delinquents, pp. 40 to 43.

*District of Columbia.*—Congress provides that no judgment of conviction against any child which is of record in the Juvenile Court of the District of Columbia shall operate as a disqualification for civil life.

39 Stat L C 92 p 56 (Act of Apr 27, 1916).

*Georgia.*—Provisions for court procedure in juvenile cases (children under 16) are extended to cover the entire State. The juvenile-court law, passed in 1915, applied formerly only to counties having a population of 60,000 or more [Federal census of 1910, Chatham and Fulton Counties]. The law now provides that in all other counties the judge of the superior court shall designate an existing court of record to act as a juvenile court, and that in counties having a population of between 35,000 and 60,000 [Federal census of 1910: Bibb, Floyd, Laurens, Muscogee, Richmond Counties], upon recommendation of two successive grand juries, he shall appoint a special judge, "whereupon it shall be considered that a special juvenile court has been established in said county." All provisions of the act of 1915 concerning authority, procedure, probation officers, and detention are to apply in every county whether the court be designated or special. The new law, however, amends

the provisions regarding the court's disposition of a child by eliminating the permission to commit to any institution that may care for children within or without the State and substituting specific permission to commit to the Georgia State Reformatory, to the Georgia Training School for Girls, or to any other State institution already existing or hereafter to be established for the correction, reformation, or protection of children.

Outside of the two counties having juvenile courts there was formerly no special procedure in regard to delinquent minors, but certain provisions (not juvenile-court laws) permitted commitment of destitute, abandoned, and neglected children by the ordinary of the county; by the mayor, recorder, or other magistrate; or by the judge of the superior court or of a court of record.

1916 No 575 p 58 amending 1915 No 210 p 35. Compare Code 1914 (Civil) ss 2849, 2850, 2862.

*Louisiana.*—Provisions concerning procedure in juvenile cases are made State wide in their application. These formerly applied only to parishes containing an incorporated town of more than 7,000 population, unless the governor issued a proclamation extending them to a parish not in this classification, after receiving an application from the police jury of such parish. [Federal census of 1910: Fifty-three parishes without incorporated town or city of more than 7,000; 7 parishes with such town—Caddo, Calcasieu, East Baton Rouge, Iberia, Orleans, Ouachita, Rapides.]

1916 A 13, adopted by popular vote Nov 7, 1916, repealing s 5 of art 118 of State constitution.

*Maryland.*—Provision is made for the organization of a "circuit court sitting in juvenile causes," with a specially designated judge, in each county of the State outside of Baltimore city. A special magistrate sitting in juvenile causes had been previously provided for Baltimore city, and the new law, State wide except for Baltimore city, follows closely the provisions of local laws passed in 1914 for Baltimore County and Harford County. It is not required that such a "circuit court sitting in juvenile causes" shall be organized, but the judges of each judicial circuit shall decide for the counties within their circuit. When such a court is organized it has jurisdiction exclusive of justices of the peace in all cases of trial or commitment to any juvenile institution of any dependent, delinquent, or neglected boy under 20 or girl under 18 years of age and plenary jurisdiction to hear and determine all cases of such children and to provide for their control and maintenance until they are 21 years of age. The definition of children subject to provisions of the act includes a child "who is feeble-minded or otherwise mentally deficient." The former procedure in regard to minors now brought under the jurisdiction of this act is changed by expressly giving to any resident

of the county or any agent of a society incorporated for the care of children the right of petition to initiate proceedings in cases of delinquent, dependent, or neglected children. Hearings and trials are to be conducted without regard to technicalities of procedure.

No justice of the peace in any county in which a circuit court sitting in juvenile causes has been organized shall commit to jail any child under 14 years of age; such children if unable to give bail shall be committed, pending trial by the juvenile court, to the care of a probation officer or to the custody of some society or institution organized for the care of children.

A circuit court sitting in juvenile causes is required to keep separate records of juvenile cases, and to appoint one or more probation officers, either men or women, except that two adjacent counties may with the consent of the judges of their circuit or circuits arrange for a joint probation officer to serve both counties. The duties of probation officers specifically include taking charge of children before or after trial as the court may direct.

A minor charged by petition with a criminal offense may pray jury trial, but pending information, indictment, or trial by criminal procedure the juvenile court retains its powers over his person.

A circuit court sitting in juvenile causes has authority to leave at his home on probation any child whom it deems dependent, delinquent, or neglected, or to place him under custody of some agency or in an institution, State or otherwise, and to change its disposition of the child at its own discretion. The agency or institution to which a child is committed has the right to place him in a family home and in this case must visit him at least once in three months and report to the court. The court may require the parent or other person legally charged with the support of any dependent, neglected, or delinquent child to pay, in full or in part, the cost of maintaining the child and may assess against him the cost of proceedings. The cost of proceedings may not be assessed against the petitioner unless the court is satisfied that the case was instituted through prejudice or without reasonable grounds. Costs, except as thus specifically provided, are to be met by the county commissioners.

Any person willfully contributing to delinquency or dependency of a child or willfully neglecting a child for whose care or support he or she is responsible is guilty of a misdemeanor and "shall be fined or imprisoned, or both." [But compare 1916 C 674, summarized on page 32.]

The act expressly states that it confers additional powers and jurisdiction on the circuit courts and is not a substitute for other powers possessed by these courts under existing general or local laws. It repeals all laws or parts of laws in conflict with its provisions to the extent of the conflict but no further.

Power to commit to various institutions for delinquents are confined formerly lodged with circuit courts and with justices of the peace except in certain counties where it was otherwise ordered by the legislature. Under the new act justices of the peace retain jurisdiction in counties for which no juvenile court is organized. In certain counties the forms of commitment by justices of the peace may be affected. A former provision for commitment of minors without proper guardianship (including definitions corresponding to present definitions of dependent and neglected children) is transferred to circuit courts and to justices of the peace concurrently, except in certain counties where it was otherwise ordered by the legislature.

1916 C 326. See A C 1911 v 3 (1914) art 27 ss 343, 345, 414, 415, 418, 419, 513-520, 540-550, 568-570, 589-591, 593-595, 602, 611-613, 616-622. A series of acts from 1911 v 1 (1911) art 42 ss 18-20. Compare 1916 C 674. For local laws committed more County and Harford County, see 1914 C 171, 367.

*Massachusetts.*—Certain provisions concerning the trial and commitment of delinquent children, which are State wide in their application except as they have been specifically superseded by the juvenile-court law, are amended. Juvenile cases must now be heard in rooms not used for criminal trials, and unless a separate juvenile-court room is provided, hearings shall, so far as possible, be in chambers. The court has power to exclude all persons who have no direct interest in the case. The former provisions applying outside of Boston stated only that the juvenile session should be separate from the sessions for criminal trials, and should so far as practicable be held in a room not used for such trials; private hearings were not provided for.

The State-wide provisions concerning juvenile cases appealed to superior court are amended to require a juvenile session of the superior court with a separate trial list and docket. No decision shall be rendered in such cases until the superior court is supplied with report of any investigation made by a probation officer of the lower court.

In the case of delinquent boys under 15 and girls under 17 the court is to commit to the Lyman School for Boys or the State Industrial School for Girls, not, as formerly, until 21, but until discharged by the trustees, and in no case for a longer period than until the child attains the age of 21 years. [This change in the juvenile-court law apparently corresponds to an earlier statute providing that the board of trustees of industrial schools "may grant an honorable discharge to any person in their custody who, in its opinion, for meritorious conduct is worthy and deserving of such a discharge, and whom the trustees believe to be permanently reformed."]

*Massachusetts.*—Provisions of contributory delinquency on the part of an adult town are amended. The court, however, is now given authority to release on probation or to suspend sentence. In Boston the juvenile court is to have concurrent jurisdiction with the municipal court in cases against adults under this section.

1916 C 243 amending 1906 C 413 ss 5, 6, 8, 13. Compare 1906 C 489; 1915

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*Massachusetts.*—Provisions regarding the use of court records of juvenile delinquents are amended. The former provisions concerning the use of such records in evidence are retained, except that where the record might be offered as evidence in a subsequent legal action in any juvenile court, now this clause is omitted and it is made that "record may be used in evidence in any

1. Criminal proceeding within two years after the dis-

\* \* \* from any institution to which \* \* \* defendant have been committed by juvenile courts." The act further provides that the record of a juvenile delinquent shall be destroyed at the expiration of his probationary period or at the expiration of two years after his discharge from an institution, unless in the meantime

he is convicted of an offense. [This act amends section 2 of act, c. 477, Acts of 1903, contained in C S 1910 v 2 (Criminal Procedure) s 207 p 1887, and both the amended and amending acts refer to records of the judge of the court of common pleas sitting as a juvenile court. An intervening act (1912 C 353), creating a separate court to be known as a juvenile court in first-class counties (Federal designation of 1910: Essex, Hudson, and Passaic Counties), makes no provision as to the subsequent use of records as evidence in proceedings, or as to the destruction of records, and it is not clear whether or not the new law (1916 C 212) applies to these first-class counties.]

1916 C 212 amending C S 1910 v 2 (Criminal Procedure) s 207 p 1887. See also 1912 C 353, especially s 23.

*New York.*—The law concerning the children's court in Syracuse is amended by adding a specific provision that all trials in that court shall be held by the justice without jury. Provisions concerning jurisdiction of the court and of the justice thereof are reworded.

1916 C 487 ss 1 and 3 amending 1910 C 676 ss 1, 2, 24, 30.

*Porto Rico.*—Any juvenile-court judge may require the physicians employed in the sanitation service or in any insular penal institution to make, without charge, such physical or mental examinations of children brought before the court as he may deem necessary. The judge may also hear the report of any other physician. The court may order commitment of children to a public institution upon the occurrence of a vacancy; formerly it had authority only to "recommend the commitment" to such institutions. The confinement of

neglected children in places where delinquent children are confined is permitted when "absolutely necessary"; formerly such confinement was prohibited without exception. No delinquent children are to be confined in the boys' or girls' charity schools.

1916 No 10 amending 1915 No 37.

#### JUVENILE DELINQUENTS.

See also Juvenile courts, pp. 35 to 40, and Miscellaneous provisions affecting defective, delinquent, and dependent children, Maryland, p. 53.

*Kentucky*.—A separate house of reform for girls is provided, with a board of managers to consist of two men and three women appointed by the governor and serving without compensation. This house of reform will receive any girl between 10 and 18 years of age committed to it by a court, but no girl shall be so committed who has a contagious disease or is a paralytic or appears to be feeble-minded, epileptic, or insane. It is the duty of the court to have the girl examined by a physician before commitment. If within six months after any girl is committed it develops that she has a contagious disease or is epileptic, insane, feeble-minded, or a paralytic, she may be returned to the county from which she was committed. Commitment shall be made for an indeterminate period, subject to parole at the discretion of the superintendent and board of managers; and the board has authority to place a girl in a suitable home subject to supervision by an agent of the institution. Certain earlier provisions applying to the house of reform at Greendale, to which girls as well as boys were formerly committed, are by the present act made applicable to the new house of reform for girls. The juvenile-court law, in effect since 1908, contains special provision for caring for diseased children coming under its jurisdiction.

1916 C 85. Compare St 1915 ss 331e.8, 2095b.

The office of court matron for police courts in first-class cities [Federal census of 1910, Louisville only] is created. The matron is to be appointed by the police judge at a salary of \$75 per month. She must have had experience and training in social work, and her duties include the investigation of histories, surroundings, character, and habits of all women and girls brought before the court and the supervision of those "under suspended sentence until final disposition of charge." [She will be concerned only with girls and women 18 years of age and over, since the juvenile court has jurisdiction over delinquent girls under 18 years of age.]

1916 C 3 amending St 1915 C 89 (ss 2774-3716) by adding s 2928b. See also St 1915 s 331e.

*Maryland.*—A curfew law is enacted to apply to incorporated towns of Kent County, forbidding the presence of any minor under 15 on the streets or in public places after 9 p. m. from October 1 to June 1, and after 10 p. m. during the other months, unless he is accompanied by an adult or is going to or from home or place of employment in the course of his occupation.

1916 C 2.

*Massachusetts.*—The State board of charity is instructed to investigate whether it would be desirable for the Commonwealth to assume the control and care of all juvenile offenders and to acquire the buildings and grounds of the Suffolk School for Boys [formerly used as truant school in Boston]. The board is to report in January, 1917, with drafts of such legislation as it may recommend.

1916 Resolves C 46.

*Mississippi.*—An act is passed providing for special court procedure in the case of any "destitute, abandoned, or delinquent" child under 18, and authorizing the establishment of a State school for such children. [This act applies, therefore, not only to "delinquent" but to "neglected" children, and is closely related in some respects to the acts classified under "Juvenile courts." The procedure, however, is optional, and the act is chiefly concerned with delinquents.] There was formerly no special procedure or institution for delinquent minors. A State industrial and training school is to be established, to which any child under 18 who is delinquent, destitute, or in evil environment may be committed. The school is to be governed by a board of five trustees appointed by the governor with advice of the senate, two for a term of two years and three for a term of five years, who shall report biennially to the State legislature. Women are specifically eligible to appointment as members of the board.

Court proceedings in cases concerning children under 18 years of age may be by petition to a chancery or circuit judge, any one of whom has jurisdiction over any case from any county in his district with power to act in vacation as well as during term of court. Juvenile cases are to be given precedence over all others except habeas corpus proceedings. The parent or guardian named in the petition is summoned to appear with the child for a hearing, from which the public may be excluded; and the clerk may, at his discretion, direct an officer of the court to bring the child at once, in which case he may admit child to bail or arrange for his custody; in no case shall he place the child in jail pending trial. The clerk of the court or the chief probation officer, if there be one, may arrange for detention rooms with any person or association, or the board of county supervisors may provide permanent detention rooms from county funds.

The judge is given wide discretion in dealing with a child; he may commit to the State industrial and training school or to any other institution subject to inspection of the court; he may release on parole or probation; or he may remand the case of a delinquent child to the circuit court for investigation by the grand jury. In the last case the judge may commit the child to jail.

Court costs are to be taxed against parent or guardian, and in case of commitment to any person or to any institution other than the Mississippi Industrial and Training School a sum for maintenance may be required of parent or other person having custody of the child at the discretion of the judge.

When a child under 18 is brought before any court for misdemeanor or violation of law, the case may be transferred to the chancery judge. Separate records shall be kept for all juvenile cases.

A child sent to the State industrial and training school may be released subject to approval of the committing judge or paroled by the superintendent at any time; if committed after conviction for crime, however, commitment is for a definite period and child may be released or paroled only by order of the court. No child shall be kept at the school after the age of 21 years.

Probation officers may be appointed at the discretion of the chancellor for any or all counties of his district, or by the municipal authorities for any municipality.

Any adult, whether parent, guardian, or other person, responsible for or contributing to delinquency or neglect of a child may be required by the court before which the child is brought to do or omit to do any acts which the judge considers necessary for the welfare of the child, under penalty of punishment for contempt of court.

Appeals from decisions of the court concerning custody of child shall be in the manner provided in civil cases.

1916 C 111.

*New York.*—Provision is made for the complete separation of minor prisoners from adult prisoners in county penitentiaries.

1916 C 394 amending C L 1909 (Prison) C 43 by adding s 325.

*South Carolina.*—All matters relating to the management of the South Carolina Industrial School [for white boys] are placed under the exclusive supervision and control of its board of trustees; and the dismissal from the institution of boys under the age of 21 now may be granted only by board of trustees upon recommendation of superintendent of the school. Dismissal was formerly permitted by the board of trustees alone or by a judge of the supreme court or of a circuit court.

1916 No 509 amending 1912 Criminal Code s 992, s 993 as amended by 1912 No 298.



*Virginia.*—The number of negro minors under the charge of the Negro Reformatory Association of Virginia for whose care compensation may be charged to the Commonwealth is increased from 150 to 200.

1916 C 35 amending Code 1904 s 4173e subsection 5 as amended by 1908 C 371.

#### MENTAL DEFECTIVES.

See also Juvenile courts, Maryland, p. 36, and Porto Rico, p. 39.

*Kentucky.*—The governor is authorized to appoint a nonsalaried commission of five persons to study feeble-mindedness in the State. This commission is to determine the number of feeble-minded persons, the cost to the Commonwealth of maintaining them, the causes of feeble-mindedness, the effect of marriage of defectives and delinquents upon the problem, and the means the State should employ to lessen the seriousness of the problem. The commission has power to employ a salaried investigator, but it is expressly provided that neither salary of investigator nor expenses incurred by the commission shall be paid by the Commonwealth. The commission is to report to the governor with recommendations concerning legislation not later than June 1, 1917.

1916 C 146.

*Maryland.*—More specific provisions are made for securing from parents, guardians, or others legally liable for support, payment for the maintenance, in whole or in part, of such inmates of the Maryland Asylum and Training School for Feeble-minded as are not totally indigent. The duty to secure information as to the financial condition of patients and relatives and to determine the amount to be paid in each case (not to exceed, however, \$20 per month), together with authority to enforce collection, is placed with the orphans' court or with the county commissioners of the county in which the patient resides. [Both the orphans' court and the county commissioners formerly had and still retain the right to commit patients to this institution.]

1916 C 566 ss 3 and 5 amending A C 1911 v 2 (1911) art 59 by adding ss 3A, 3B, 46A, 46B.

A State commission, consisting of the State lunacy commission and the State board of public works, is appointed to report to the legislature of 1918 on the advisability of purchasing, for a State hospital for insane and feeble-minded persons in western Maryland, the property in Allegany County now being used as a county home for insane and feeble-minded [the last such county home in the State]. The county commissioners of Allegany County are authorized to sell the property.

1916 C 642.

*Massachusetts.*—The State board of insanity is abolished and there is substituted for it a commission on mental diseases, which has all the powers and duties of the former board. This commission is to consist of five members appointed by the governor. The director and at least two associate members shall be physicians expert in the care of the insane. The director shall receive not more than \$7,500 salary and the others shall serve without compensation. The board of insanity had three members, all salaried, one of whom was an expert. In addition to performing duties of former board of insanity, commission shall inspect every institution under its supervision at least once a year, and oftener if the governor directs, and every patient shall be given opportunity for an interview with the visiting members or agents of the commission. Every private hospital for the feeble-minded, epileptic, etc., must be licensed annually by the commission. The former law (1914) provided for an annual license of such hospitals established thereafter, but did not require the annual licensing of older institutions.

1916 C 285. Compare 1914 C 702.

The procedure for the commitment of feeble-minded persons to the Massachusetts School for Feeble-minded [at Waverley] and to the Wrentham State School is amended. Any physician who certifies to a judge of probate [court having jurisdiction in commitment] concerning the mental condition of an alleged feeble-minded person shall have examined the patient within 5 days of signing the certificate; the certificate must bear a date not more than 10 days earlier than the order of commitment; and the order of commitment is void if the patient is not received at the school within 30 days after the date of the order. The law includes a similar amendment concerning a physician's certificate for a voluntary patient. The inmate himself is now permitted to make application for release.

1916 C 122 amending 1909 C 504 ss 63, 64, 78-80.

The State board of insanity [commission on mental diseases] is authorized to establish at Belchertown a new school for the feeble-minded. An appropriation of \$150,000 is made, but it is provided that no expense shall be incurred until the plans of construction and an outline plan for future development have been approved by the governor and council. The labor of patients under the control of the trustees of the Massachusetts School for the Feeble-minded shall be utilized so far as possible. Massachusetts has already two State schools for the feeble-minded, the Massachusetts School for the Feeble-minded at Waverley and the Wrentham State School.

1916 Resolves C 160. Compare 1909 C 504 ss 14, 59-65. See also 1916 C 285, summarized above.

The construction of a recreation building at the Massachusetts School for the Feeble-minded is authorized, and the sum of \$23,700 is appropriated for the purpose.

1916 Resolves C 127.

*New Jersey.*—The establishment of State colonies for feeble-minded males is authorized. These patients formerly were cared for at the village for epileptics, though by an act of 1915 admission of feeble-minded males to the State home for feeble-minded women was permitted. The colonies are to be under a nonsalaried board of managers, consisting of the commissioner of charities and corrections and four other persons appointed by the governor. Admission shall be in the manner already provided by law for the admission of feeble-minded persons to institutions. The act includes an appropriation of \$25,000.

1916 C 61. Compare 1911 C 229; 1915 C 151.

It is provided that the cost of maintaining those patients committed to the village for epileptics who are not indigent shall be paid in whole or in part from the patient's estate or by certain specified relatives. The amount is to be determined in each individual case by the committing court, and in no case shall it exceed the minimum paid by private patients.

1916 C 95 supplementing C S 1910 v 4 (State Village for Epileptics) ss 1-31 p 4961 as amended by 1914 C 224.

The commission for the study of mental defectives is continued, and it is directed to report to the legislature of 1917.

1916 Joint Resolution No 1. See 1913 Joint Resolution No 5 and 1915 Joint Resolution No 1.

*New York.*—The superintendent of the Rome State Custodial Asylum [for feeble-minded and idiots] is authorized to grant to groups of inmates parole or leave of absence to do domestic, agricultural, or forestry work under specified State supervision, such action to be subject to the approval of the board of managers of the asylum. The expense connected therewith is to be met by the asylum. Formerly there was merely a general provision for parole by the superintendent subject to rules of the board of managers of the asylum.

1916 C 71 amending C L 1909 (State Charities) C 55 s 95 as amended by 1912 C 448 by adding subdivision 11.

It is made a misdemeanor to entice away or assist in the escape of an inmate of any public charitable institution for the feeble-minded, epileptic, or insane, or of a reform school; or, knowing a person to be such an inmate, to promise to provide a home for, or to pay for

services of, or to marry him or her without approval of the board of managers of the institution.

1916 C 320 amending C L 1909 (Penal) C 40 by adding s 1250-a.

*Rhode Island.*—The name of the Rhode Island School for the Feeble-minded is changed to Exeter School.

1916 C 1381 amending G L 1909 C 103.

*Virginia.*—The duties and powers of the State board of charities and corrections are extended, with special reference to the feeble-minded. [For a provision concerning the duties of the board in relation to dependent children, see 1916 C 436, summarized on page 35.] It is now specified that this board shall license and inspect private institutions caring for the feeble-minded and supervise the placing out of feeble-minded children. The board formerly had these duties in relation to dependent and delinquent children, but feeble-minded persons were not specified. Further, the board is now required to visit from time to time all feeble-minded children placed in homes and is given the right to place them elsewhere if the rules laid down by the board are not followed. It is required to keep a register of the feeble-minded; to take such legal steps as may be necessary to protect feeble-minded persons in any town or county; to institute proceedings for commitment and registration of all feeble-minded persons; to give notice and instructions confidentially to parents and guardians of such mentally defective children as are not dependent upon the care of the State and are not a menace to themselves and others. The board is instructed also to deport such nonresidents of Virginia as may be found within the State and liable to become charges upon the State when in the judgment of the court deportation is necessary.

1916 C 104. For duties of State board of charities, see 1908 C 276; 1910 C 289; 1912 C 309; 1914 C 147, 350.

A law concerning the commitment of feeble-minded persons is enacted. Formerly such commitment was subject to the provisions concerning the insane except in so far as special procedure was set forth in the act (1912) governing the colony for feeble-minded white persons or in the act (1914) governing the colony for feeble-minded colored persons. The new law is a substitute for the sections relating to commitment in these acts and includes, with amendments, the special procedure of these earlier acts, incorporates with it certain provisions from the laws governing the insane, and adds certain new provisions. The procedure set forth in the present act is summarized below, and provisions which did not formerly appear in any statute are indicated as new. [It should be noted that the act of 1914 was more detailed than the act of 1912, and certain provisions not desig-

nated as new in the following summary applied formerly to colored patients but not to white patients.]

A feeble-minded person is defined [new] as "any person with mental defectiveness from birth or from an early age, but not a congenital idiot so pronounced that he is incapable of caring for himself or managing his affairs, or of being taught to do so, and is unsafe and dangerous to himself and to others and to the community, and who, consequently, requires care, supervision, and control for the protection and welfare of himself, of others, and of the community, but who is not classable as an 'insane person,' as usually interpreted." When a person is supposed to be feeble-minded, any reputable citizen may file a petition with the circuit or corporation court, or, in vacation, with the judge thereof, or before a justice in the city or county in which the alleged feeble-minded person lives, setting forth the facts under oath ["under oath" new] and stating [new] the person's financial condition, and the names and financial condition of the persons, if any, having custody over him, and of his parents, guardians, brothers, and sisters.

The judge or justice shall issue a warrant ordering the alleged feeble-minded person to be brought before him and shall summon as witnesses not only two physicians (one of whom shall when practicable be the family physician of the feeble-minded person and neither of whom shall be related to him) and other persons competent to testify, but also [new] the persons named in the petition. The judge or justice and the two physicians shall constitute a commission to determine whether or not the person is feeble-minded; and, if they find that he is feeble-minded and is not under such care as to insure the welfare of himself and of others, they shall file with circuit or corporation court a written report containing their conclusions and recommendations.

If commission reports that the person is not feeble-minded, he is discharged and the petition dismissed. If he is deemed feeble-minded, the court, or the judge in vacation, may appoint a guardian of the feeble-minded person and also the same or a different person as guardian of his property, or he may commit the person to a State institution for the feeble-minded or [new] to a private institution approved by the State board of charities and corrections. Pending admission into an institution the person may be committed to the custody of the city or county superintendent of the poor. The person adjudged feeble-minded has right of appeal to the supreme court of appeals. [Formerly appeal was allowed from unlawful confinement, but court was not specified.]

If person is committed to an institution, the clerk of the court shall send a copy of the order of commitment to the State board of charities and corrections and two copies to the superintendent of the in-

stitution, who shall receive the patient as soon as there may be room for him. The superintendent shall examine the papers and return them for correction if he discovers any irregularity in the papers or has reason to believe that the person is illegally committed. Upon receiving the patient the superintendent indorses the commitment papers and returns one copy to the court. The superintendent is to be notified of time and place of hearing upon any petition for the removal of the patient or for variations in the order of commitment. [Provisions for filing of papers with State board of charities and corrections and for examination and indorsement of papers by superintendent are new.]

Before being delivered to an institution the patient must be clean, properly clothed, and free from contagious disease, and he must have been successfully vaccinated against smallpox. He shall be delivered, at the expense of the county or corporation from which he is committed, at the nearest railroad station or steamboat landing. The superintendent shall appoint an attendant to conduct the patient to the institution; female attendants [new] shall be provided for female patients. The cost of conveying the patient shall be paid from funds appropriated for his support.

Upon admission to an institution the patient shall be under special observation for not less than two months ["two months" new], and his mentality shall be tested by the superintendent and by an expert approved by the board of directors of the institution. Expert was formerly approved by State board of charities and corrections. If after observation and examination the patient is considered to be not feeble-minded or not a suitable subject for care and treatment, he shall be returned to the city, county, or institution from which he was committed.

The superintendent shall provide training, suitable employment, and [new] such medical and surgical care as may better the condition of the inmates.

Any person maliciously contriving the commitment of a person who is not feeble-minded or any person violating any provision of the act shall be guilty of a misdemeanor and subject to fine of not more than \$1,000, or to imprisonment for not more than one year, or both [new].

Specific provision [new] is made for transfer of patients from an institution for the feeble-minded to an institution for the insane and vice versa.

Furloughs may be issued by the superintendent, at his discretion, if the cost is met by the inmates granted furloughs or by their friends; and [new] if they can not pay the cost of a furlough the institution may do so.

Voluntary patients may be received by a State institution provided [new] no indigent person who has been committed is thereby denied admission. The receiving of any voluntary patient shall be reported to the commissioner of State hospitals and the special board of directors [of the institution]. Charges for voluntary patients shall be fixed by the commissioner of hospitals and the general board of directors of State hospitals and may not exceed the cost of care, maintenance, and treatment.

Forms for papers used in carrying out provisions of the act shall be prepared by a committee consisting of the superintendents of the State colonies for the feeble-minded, the secretary of the State board of charities and corrections, and the commissioner of State hospitals for the insane.

As soon as room is available at the appropriate institution, no feeble-minded woman of childbearing age shall be received as an inmate of any almshouse [new].

This act includes a provision [given more fully in 1916 C 312, summarized below] concerning examination of prisoners of doubtful mentality, who have been brought before a court for any cause.

Former provisions are repealed only in so far as they are inconsistent with the present act, and apparently any points affecting commitment of the feeble-minded not otherwise specifically provided for are subject to the general provisions concerning the insane.

1916 C 388. For former law governing colony for feeble-minded white persons, see 1912 C 196; for former law governing colony for feeble-minded colored persons, see 1914 C 346. For provisions in law governing the insane not found in either 1912 C 196 or 1914 C 346 but included (with amendments) in 1916 C 388, see Code 1904 ss 1669 as amended by 1910 C 102, 1671-1673, 1675-1677, 1685, 1688, 1690, 1697, 1698 as amended by 1912 C 168, 1699-1702; 1914 C 248. For general law governing the insane, see Code 1904 ss 1660-1713c and the following acts amendatory and supplementary thereto: 1906 C 115, 189; 1908 C 184; 1910 C 102, 319, 320, 321; 1912 C 168; 1914 C 248, 313, 334.

The judge of any court [specifically including the juvenile court] is authorized to direct some officer of the court or other suitable person to institute proceedings leading to inquiry concerning the mental condition of any person brought before the court for any cause, who appears to be feeble-minded. The act provides for care and detention pending inquiry and for observation of mental condition for from 60 days to 6 months, and specifies that in certain cases the test of mentality shall be applied with assistance of expert designated by State board of charities. Former statutes permitted mental examination only of criminals suspected of insanity and of children brought before a juvenile court.

1916 C 312. For juvenile-court provision, see 1914 C 350 s 4; for provisions for criminal insane, see Code 1904 s 1660 as amended by 1910 C 319; s 1682 as amended by 1910 C 320 and 1914 C 313; s 1687 as amended by 1910 C 321; ss 4080-4085. See also 1916 C 388 s 10.

Commitment procedure is eliminated from the act governing the colony for feeble-minded white persons (part of the Virginia State Epileptic Colony). [For present procedure, see 1916 C 388, summarized above.] The following changes are made in provisions of the act:

The relation of this colony to the Virginia State Epileptic Colony in regard to management, records, etc., is more clearly defined. Children not under 8 years of age [and, as formerly, women 12 to 45] are to be given preference in admitting patients to colony. The superintendent is specifically instructed to provide for the training, suitable employment, and medical care of patients. A special teacher for children of school age in the colony is to be provided; these children are to be included in the school census. The superintendent is to employ an expert in making mental examinations to test condition of all patients from time to time and to act with State board of charities and corrections in making such tests as law or board may require. The definition of feeble-mindedness is reworded; it now corresponds to that in the general commitment act [see 1916 C 388, summarized above] except that the clause in that act exempting congenital idiots without defining them is omitted, and the following provision is added: "No feeble-minded person of the class commonly known as 'congenital idiots'—that is, whose mentality is not beyond that of a normal child 2 years old—shall be admitted to the said colony until a separate building has been provided for that class of feeble-minded persons." The former law governing the colony for feeble-minded white persons provided that no congenital idiots were to be admitted.

Feeble-minded males are to be cared for at the State epileptic colony until a separate building can be provided for them at the feeble-minded colony.

1916 C 106 amending 1912 C 196. Compare 1916 C 388.

The act governing the colony for feeble-minded colored persons is amended by eliminating the commitment procedure [for present commitment procedure, see 1916 C 388, summarized above] and by rewording the definition of a feeble-minded person to agree with that found in the commitment act [1916 C 388, summarized above] except that the clause in that act exempting congenital idiots (without defining them) is omitted.

1916 C 207 amending 1914 C 346.

The income from the estate of a person committed to a State institution for insane, epileptic, or feeble-minded shall be paid to the steward of the institution for the purchase of extra comforts for the inmate, but must not be applied to the cost of ordinary maintenance. Such payment, however, shall not exceed \$200 annually unless specifi-



cally ordered by the court and is not required when inmate has husband, wife, or child lawfully dependent on him or her for support.

1916 C 255.

#### MOTHERS' PENSIONS.

*Maryland.*—Provision is made for pensions from county funds, or in Baltimore city from city funds, for widowed mothers of children under 14 years of age, subject to the following conditions: (1) Child or children must be living with the mother; (2) conditions must be such that if relief were not granted the mother would be required to work regularly away from home in order to maintain her child or children (but permission may be granted to a mother receiving a pension to work away from home for a definite number of days each week to be specified in the order giving relief); (3) mother must be "a proper person, worthy and fit, to bring up her children"; (4) mother may not be owner of property, either real or personal, other than her household goods; (5) mother must have resided in the county where application is made, or in Baltimore city if application is made there, at least three years before making application; (6) relief granted on behalf of any child ceases when that child becomes 14 years of age, except that if child is ill or incapacitated for work the pension may continue during his illness or incapacity until he is 16. Amount of pension is fixed as follows: \$12 per month for the oldest child, \$10 per month for the next oldest, and \$6 per month for each additional child; total not to exceed \$40 for any one family. County commissioners in the counties, and in Baltimore city the board of estimate and city council, are empowered and instructed to raise funds to pay the allowances by a tax levy not exceeding one-tenth of a mill, or to provide funds from the general tax levy. The total to be raised is not stated, and the law provides that in case funds are insufficient the neediest mothers shall be selected.

The administration of the law in Baltimore city is placed with the board for mothers' relief (three persons, only two of whom shall be of the same sex) to be appointed by the mayor, or with the supervisors of city charities if, at the discretion of the mayor and city council, such board is not appointed. In the counties the law is to be administered by the county commissioners. Petition for pension is presented to these authorities and investigated by them, but the power to grant and to revoke a pension rests with the juvenile court or, in a county where no juvenile court exists, with the circuit court. The State appropriates \$10,000 for the establishment and maintenance of the board of mothers' relief in Baltimore city; the board is to receive \$5 per day for each member for each day the board shall sit, and it has power to employ a secretary, a stenographer, and three investigators. It also appropriates \$5,000 "for administrative purposes," to be divided among the several counties in proportion

to their population. Recommendations, together with a detailed report of the number of beneficiaries, the amount expended, and the advantages of the system, are to be made to the legislature of 1918 by the authorities administering the law.

1916 C 670.

*New Jersey.*—It is provided that if any county board of chosen freeholders has appropriated no money or too little money to meet the expenses of certain specified county activities, including widows' pensions and work of the State board of children's guardians [care and supervision of dependent children], then the board may raise the money to meet the deficiency by adding the amount thereof to the appropriations for the current year, which may be raised by taxation or by a temporary loan bond.

1916 C 201 supplementing C S 1910 v 1 (Chosen Freeholders) ss 70-74 p 492. See C S 1910 v 2 (Infants) ss 62-74 p 2819 and 1913 C 281 as amended by 1915 C 118 and 238.

*New York.*—The provision that city commissioners of public charities shall be ex officio members of the city boards of child welfare appointed to administer the mothers' pension law in cities is repealed. An appointed member is to be substituted for such commissioner, and the term of office for all members is lengthened from eight to nine years. The investigation and supervision of persons receiving allowances is to be only by the board; formerly "by the board when consistently possible or by authorities now intrusted with similar work."

1916 C 504 amending C L 1909 (General Municipal) C 24 ss 150 and 152 subdivision 4, both as added by 1915 C 228.

#### **MISCELLANEOUS PROVISIONS AFFECTING DEFECTIVE, DELINQUENT, AND DEPENDENT CHILDREN.**

*Georgia.*—Provision is made that at each regular term of court the grand jury of each county shall appoint from among their own number a special committee of not less than five persons, whose duty it shall be to visit, inspect, and inquire into all private institutions of specified types within the county [institutions in which persons are kept in confinement; orphanages specified in title of act]. The committee is instructed to confer with each inmate to learn how he or she came to be confined in the institution; what labor, if any, is required; and whether he or she desires to remain. The committee is to report publicly to the judge and to the solicitor of the superior court the names of dissatisfied persons and the facts in each case; if any person is illegally deprived of liberty, the committee shall demand his release; if release is refused, the grand jury shall make special presentment for false imprisonment. A previous law, still in force, provides for annual inspection of the Georgia Industrial Home and

other similar institutions for children by a committee of nine from the general assembly.

1916 No 548 p 126. Compare Code 1914 (Civil) s 2865.

*Maryland.*—The provisions relating to organization and powers of the board of State aid and charities are changed. Provision is now made for appointment by the governor biennially of three members to serve four years, the governor himself to be ex officio the seventh member of the board. Two of the members may be women; not more than three members shall be residents of the same city or county. The salary of the secretary is raised from \$1,800 to \$2,200 and he is required to give full time to the duties of the board. The law now provides also for clerks. Right of inspection is extended to include institutions for dependents and delinquents having contracts with the State as well as such institutions receiving financial aid from the State. Formerly the board had supervision only over the latter. Appeal from decision of the board may be taken to any court of general common-law jurisdiction in the county or city where the office of the board is located. All moneys appropriated to institutions shall be paid on a per capita basis according to rates fixed by the board of public works.

1916 C 705 amending A C 1911 v 2 (1911) art 88A ss 1, 3, 5, 6, and adding s 4A to same article.

A child under 6 months of age may not be separated from its mother for the purpose of placing child in foster home or institution unless (a) two physicians certify that the separation is necessary for the physical good of mother or child; or (b) a court of competent jurisdiction so orders; or (c) the board of State aid and charities considers the separation necessary and consents in writing thereto. A foster home or institution receiving any child under such age without its mother is required to file the physicians' certificate above provided for with the board of State aid and charities. It is the duty of all persons participating in the separation of a child from its mother to find out whether the separation has been duly permitted or ordered. All participating in receiving a child at an institution are required to find out whether the mother is living, and in that case are similarly responsible for verifying the legality of the separation and also for reporting any violation of the act. This board shall investigate the facts in each case of separation coming under its notice, and when it appears that this act has been violated shall report the facts to the authorities charged with the enforcement of the criminal laws. Violation of any provision is a misdemeanor punishable by a fine of not more than \$100, or imprisonment in jail for not more than 100 days, or both.

1916 C 210 amending A C 1911 v 3 (1914) art 27 by adding s 483.

**MISCELLANEOUS PROVISIONS AFFECTING CHILDREN.****MILITARY AND PHYSICAL TRAINING.**

*Louisiana.*—It is required that in all grades of the public schools higher than the eighth instruction in military science and tactics shall be given to all male pupils for at least one hour a week.

1916 A 131.

*Maryland.*—The governor is authorized to appoint a nonsalaried commission of nine persons (adjutant general and two other officers of militia, three members of veteran organizations, and three persons not members of either), to report on military education, military service, and a military reserve. Two of the subjects specified are the practicability of providing military education for boys between 14 and 21 and the practicability of providing military training for youths in the public schools.

1916 C 23.

*Massachusetts.*—The governor is authorized to appoint a special nonsalaried board of three persons to investigate the subject of physical training of boys and girls in public schools and to recommend a system which will improve their physical, mental, and moral qualities and provide an adequate basis for a citizen soldiery, with special reference to physical and disciplinary training, military history, and personal hygiene and sanitation; the board is to report to the legislature in January, 1917. The sum of \$1,000 is allowed for expenses. [A similar commission was appointed in 1915 to report in January, 1916, on military training in high schools.]

1916 Resolves C 90. Compare 1915 Resolves C 81.

A law is enacted permitting students in educational institutions where military science is a prescribed part of the course of instruction and students enrolled in a military organization approved by the Secretary of War or the Secretary of the Navy of the United States, and over which an officer of the United States Army or Navy or the Massachusetts volunteer militia has supervision, to drill and parade with firearms in public under the superintendence of their instructors, subject to the approval of the governor and such conditions as he may prescribe.

1916 C 8 amending 1908 C 604 s 170.

*New Jersey.*—Provision is made for a nonsalaried commission to investigate and report to the legislature on February 1, 1917, upon military training and instruction for national defense in high schools. This commission is directed to consider what instruction would be feasible, the extent to which the Federal Government would cooper-

ate, and the probable expense to the State, giving attention to the experience of other States and nations. It shall consist of one member of the house and one member of the senate, to be named by these bodies; two schoolmen connected with the high schools of New Jersey, to be named by the commissioner of education; and one person in active military service, if possible the national service, to be appointed by the governor. The commission shall expire on June 1, 1917, unless otherwise ordered by the legislature. The sum of \$2,000 is appropriated for expenses.

1916 C 211.

*New York.*—Provision is made for a permanent nonsalaried military training commission of three members—the major general commanding the National Guard, one member appointed by the board of regents of the University of the State of New York, and one member appointed by the governor; the term of office of appointed members is four years. The commission shall appoint an inspector of physical training at a salary not to exceed \$5,000. An appropriation of \$100,000 is made for expenses.

All boys above 16 and not over 19 years of age are to be given such military training as the commission shall prescribe for not more than three hours weekly, except that any boy may be exempted by the commission, and that boys who are regularly and lawfully employed are not required to take training unless they volunteer and are accepted. For boys attending school or college this training shall be given during the school or college year, but outside of the time assigned to other instruction; for boys who are not pupils it shall be given between September 1 and June 15. This training is to be conducted under the supervision of the commission by such male teachers and physical directors as may be assigned by school and college authorities and accepted by the commission, and by militia officers and men detailed by the major general commanding the National Guard or such officers and men of the United States Army as may be available. Instructors other than United States Army instructors are to be paid by the commission.

The commission shall establish and maintain State military camps for field training of boys between 16 and 19 years of age who are physically fit and who are accepted by the commission; where sufficient money is not available to provide for all, preference will be given first to boys attending secondary schools during the preceding year, and second to those attending State agricultural schools and colleges. Each detachment of boys must remain in camp not less than two nor more than four weeks, as the commission may determine; training and discipline are to be under the major general commanding the National Guard, subject to the supervision of the

commission; militia officers and men are to be detailed as instructors. The commission is to determine the location of the camps, and any organization owning a fairground and entitled to an apportionment of State moneys must, if requested by the commission, allow the use of its grounds for such a camp unless they are needed for its own purposes or have been previously leased to other parties; if it refuses such use, the State appropriation for that year will be withheld.

The commission shall advise with the board of regents as to the physical training to be prescribed for the elementary and secondary schools as provided in the education law [1916 C 567, summarized below], and it shall further recommend to the board of regents the establishment in these schools of such habits, customs, and methods as are best adapted to "develop correct physical posture and bearing, mental and physical alertness, self-control, disciplined initiative, sense of duty and the spirit of cooperation under leadership."

Other powers and duties of the commission include inspecting the work prescribed under this act or under the provisions of the education law [1916 C 567, summarized below]; prescribing the powers and duties of the inspector of physical training; and maintaining and cooperating with colleges in the State and with Federal authorities in maintaining courses of instruction for male teachers, physical instructors, and others who volunteer and are accepted by the commission.

Armories and military property of the State may be loaned to the commission for carrying out these provisions, and the use of school buildings and grounds is permitted. The provisions of the act do not apply to pupils of any college receiving Federal aid and requiring military drill.

1916 C 566 amending C L 1909 (Military) C 36 by adding ss 26 to 29-d.

The education law is amended by providing that all pupils, both boys and girls, above 8 years of age shall receive as a part of the course of instruction in all elementary and secondary schools the prescribed course of physical training which may be adopted by the board of regents of the University of the State of New York after conference with the military-training commission. [See 1916 C 566, summarized above.] This training shall average not less than 20 minutes a day. Attendance at a private school at which a similar prescribed course in physical training is not given shall not be considered equivalent, in satisfaction of the compulsory school-attendance requirements of the law, to instruction in a public school. Regents are responsible for administrative details in making the act effective. State school money is to be apportioned to each district and to meet part of the expense of the prescribed courses.

1916 C 567 amending C L 1910 (Education) C 16 by adding article 26-A (ss 695-697).

**POLICEWOMEN.**

*Virginia.*—The appointment of policewomen in cities having 15,000 or more population is permitted.

1916 C 281.

**SOCIAL INSURANCE.**

*Massachusetts.*—Provision is made for a special recess commission on social insurance to consist of two senators appointed by the president of the senate, four representatives appointed by the speaker of the house, and three other persons appointed by the governor. The commission is to receive such compensation as shall be allowed by the governor and council, and is to report to the legislature in January, 1917, with drafts of such laws as it may recommend.

1916 Resolves C 157.





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## APPENDIX.

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### OUTLINE FOR INDEX OF EXISTING LEGISLATION AFFECTING CHILD WELFARE.

This index outline does not contain a model list of topics which should be covered by legislation, but is merely a list of topics which have been found to be at present covered by the laws of a number of States. It is not based upon any logical or ideal analysis of child-welfare laws, but upon the topics as they are actually found in existing legislation. In certain cases, as, for example, in the case of laws relating to dependent and to delinquent children, two distinct though related subjects are frequently connected in the laws as they now stand upon the statute books, and this connection has been preserved in the index outline wherever necessary to avoid a large amount of duplication in the references.

The Children's Bureau is preparing a reference index by States of existing legislation on the subjects covered by the outline, specifying for each State those topics given in the index outline upon which that State has legislation, together with references to the sections and acts where such legislation is found. In indexing these laws charter provisions and local and special laws are omitted and court decisions are not at present included.

#### (A) PARENT AND CHILD:

##### 1. DUTIES AND LIABILITIES OF PARENTS—

Abandonment—Neglect—Nonsupport.

Abuse and cruelty.

Acts committed by child, parental liability for; liability for torts of child, etc.

Care and support, duty to provide—

Duty of father to provide; when duty of mother.

(In cases of divorce or separation, *see* "A-3, Divorce.")

(For illegitimate children, *see* "A-5.")

Maintenance, allowance for, out of child's estate.

Protection (of child from injury; justifiable homicide, etc.).

Miscellaneous.

##### 2. RIGHTS OF PARENT AND CHILD—

Actions (for injury to person of child, etc.).

Custody and control of child's person and property. (*See also* "A-3, Divorce.")

Legal settlement of children. (*See also* "H-6, Poor relief.")

Parental rights, termination of—Emancipation, etc.

Services and earnings.

Support of parent by child. (*See also* "H-6, Poor relief.")

Miscellaneous.

**(A) PARENT AND CHILD—Continued.****3. MARRIAGE AND DIVORCE—**

## Divorce—

Grounds for, etc.

Custody and support of children.

Effect on legitimacy of children, etc.

## Marriage—

Age of consent to marriage, consent of parents, guardians, etc.

Marriage of feeble-minded, epileptic, insane, etc.

Void and voidable marriages, what constitutes; effect of on legitimacy of children. (For annulment of marriage, *see* "A-3, Divorce.")

Miscellaneous: Licenses, etc.

**4. ADOPTION—**

Who may adopt; who may be adopted.

Consent of parent, guardian, etc.

Court jurisdiction, procedure, records, etc.

Effect of adoption—

Change of name of child.

Liabilities of adopting person.

Inheritance and property rights of adopted child and others.

Abrogation of adoption.

Advertising, etc., for adoption; penalty.

State control over adoption.

(For adoption through and from institutions, *see* "H-4"; from boarding homes for infants, *see* "D-3"; and *see also* "H-3," "H-5," and "G.")**5. ILLEGITIMACY—**Illegitimate children, who are. (*See also* "A-3.")

Responsibility of father; of mother.

Illegitimacy proceedings—

Disclosure of father.

Complaint, warrant, arrest.

Bond for support, etc.

Methods of legitimation—

Acknowledgment by father.

Subsequent intermarriage of parents, etc.

Inheritance and property rights and disabilities of parent and child.

**6. MISCELLANEOUS.****(B) GUARDIAN AND WARD:**

Appointment and kind of guardian—

"Joint guardianship."

Testamentary guardianship, right of father, and of mother to appoint.

Miscellaneous.

Duties, powers, and responsibilities of guardian.

Rights and liabilities of the ward.

Termination of guardianship, etc.

State guardianship; guardianship of institutions and agencies, etc. (For this subject, *see* "G," "H-3," "H-4," and "I-1.")

**(C) OFFENSES AGAINST THE CHILD:**

**1. SPECIFIC OFFENSES—**

- Abandonment and neglect. (For same by parents, *see* "A-1.")
- Abduction—Kidnapping—Child stealing.
- Abortion and prevention of conception.
- Abuse and cruelty. (For same by parents, *see* "A-1.")
- Admittance to dance halls, saloons, etc.
- Age of consent. (For this subject, *see* "Sexual crimes" hereunder.)
- Contributing to dependency and delinquency of child. (*See also* "H-1, Adult responsibility for delinquency and dependency," and "H-3.")
- Corrupting and depraving morals.
- Cruelty, societies for prevention of. (*See* "Abuse and cruelty," hereunder, and also "C-2.")
- Disposing of child for unlawful purposes.
- Endangering life, health, or limb.
- Gaming.
- Indecencies with children.
- Infanticide.
- Medicines and poisons, distribution of.
- Obscenity: Literature, plays, pictures, etc.
- Prostitution, procuring girls for, etc.
- Receiving goods from minor unlawfully.
- Sales, gifts, etc., unlawful: Cigarettes, weapons, liquor, etc.
- Sexual crimes; Age of consent, etc.
- Substitution of children.
- Trials, indecent, etc., exclusion of child; of public when child testifies.
- Miscellaneous—
  - Pregnant woman, suspension of execution.
  - Misdemeanor, penalty for, etc.
  - Blindness of infants, failure to report. (For this subject, *see* "D-2.")
  - Concealment of birth. (*See also* "A-5," and "D-5, Births, concealment of.")
  - Unlawful employment of child. (For this subject, *see* "F-1.")

**2. ENFORCEMENT AND ENFORCING AGENCIES.**

**(D) HEALTH AND SANITATION:**

**1. ADMINISTRATIVE AND ENFORCING AGENCIES.**

(Boards of health—Health officers—Miscellaneous.)

**2. BLINDNESS OF INFANTS, PREVENTION OF—OPHTHALMIA NEONATORUM.**

**3. HOSPITALS FOR CHILDREN (for defectives, *see* "I-1")—**

- Boarding homes for infants.
- Children's hospitals.
- County and municipal hospitals, provisions for children in.

**(D) HEALTH AND SANITATION—Continued.****3. HOSPITALS FOR CHILDREN—Continued.**

Maternity hospitals.

Tuberculosis hospitals. (Provisions for children are specified.

For schools for tubercular children, *see* "I-1, Diseased, general provisions for.")

Other hospitals, provisions for children in.

Miscellaneous.

**4. MIDWIVES—**

Registration of.

Regulations for practice of profession; licensing, etc.

Duty to report cases of infected eyes. (*See* "D-2.")

Duties relative to reporting births. (*See* "D-5, Births and deaths, registration of.")

**5. VITAL STATISTICS (birth registration, etc.)—**

Births and deaths, registration of—

State and local authorities (registrars, etc.) charged with collecting and recording vital statistics; enforcement.

Duty of midwives, physicians, householders, etc., to report births.

Certificate of birth, contents; illegitimacy, stillbirths, infantile blindness, etc., reportable. (*See also* "D-2" and "D-4.")

Births, concealment of. (*See also* "A-5" and "C-1, Miscellaneous.")

Miscellaneous.

**6. MISCELLANEOUS HEALTH LAWS—**

Adulteration of candy. (Provisions are given where children are specified.)

Antitoxins, etc., free to indigent.

Communicable diseases, where children are specified.

Divisions of child hygiene, establishment of. (*See also* "D-1.")

Milk regulations.

Public health or visiting nurses.

Vaccination of pupils, etc.

(For alcoholics and narcotics, teaching effect of, *see* "E-3"; medical and dental examination of pupils, *see* "E-3"; health and sanitation in schoolhouses, etc., *see* "E-3"; health and sanitation in institutions, *see* "H-4" and "I-1.")

**7. RECREATION—**

Civic and social centers, use of schoolhouses, public buildings, etc., for.

Dance halls, theaters, etc., regulation of. (For admittance to, of minors, *see also* "C-1.")

Playgrounds and recreation centers.

Public baths.

Miscellaneous.



**(E) EDUCATION LAWS:**

**1. ADMINISTRATIVE SUPERVISION AND CONTROL (indexed briefly)—**

Boards of education, school officers, etc.

School meetings.

Administrative units: Districts, consolidation of districts, etc.

**2. FINANCES AND SUPPORT—GROUNDS AND BUILDINGS.**

(These laws are not included. For sanitation of schoolhouses, etc., *see* "E-3.")

**3. MISCELLANEOUS PROVISIONS AND REGULATIONS—**

Age of children entitled to educational facilities; other requirements.

Arbor day and other holiday provisions.

Alcoholics and narcotics, teaching effect of.

Colored children, separate provisions for.

Exclusion and expulsion of pupils.

Fire drills; fire escapes.

Health provisions and sanitation in schoolhouses.

Liquor traffic; sale of intoxicants within certain distance from schools.

Medical and dental examination of pupils.

School discipline.

Subjects taught.

Subnormal children, special provisions for.

Teachers, special qualifications of; attendance at institutes.

Textbooks, free.

Term, length of.

Transportation of pupils.

(For compulsory school attendance, school census, and truant and parental schools, *see* "F-2"; civic and social centers and playgrounds, *see* "D-7"; school children, special aid to, *see* "H-8"; schools for tubercular children, *see* "I-1, Diseased, general provisions for"; vaccination of pupils, *see* "D-6.")

**4. SPECIAL SCHOOLS—**

Agricultural schools.

Continuation schools.

Domestic science. (*See also* Vocational, trade, and industrial schools hereunder.)

Evening schools.

Kindergartens.

Manual training. (*See also* Vocational, trade, and industrial schools hereunder.)

Trade and industrial schools. (*See also* Vocational, trade, and industrial schools hereunder.)

Vocational, trade, and industrial schools.

Miscellaneous.

**(F) CHILD-LABOR LEGISLATION (indexed briefly) :****1. CHILD LABOR LAWS—**

Minimum age (specifying occupations).  
Employment certificates and records.  
Hours of labor (specifying occupations).  
Street trades.  
Public exhibitions.  
Enforcement.  
Violations and penalties.

**2. COMPULSORY SCHOOL ATTENDANCE—**

Ages between which attendance is compulsory.  
Attendance required.  
Attendance of working children (day, evening, and continuation schools included).  
Enforcement; attendance and truant officers, etc.  
School census.  
Violations and penalties.  
Truant and parental schools.  
(For employment during school hours, etc., *see* "F-1.")  
(For compulsory school attendance of defectives, *see* "I-1.")

**3. APPRENTICESHIP—**

Who may bind children as apprentices.  
Terms of indenture (including schooling while employed, etc.).  
Duties of parent, guardian, master, and apprentice.  
Penalties for violation; master, apprentice.  
Apprenticing by institutions; by overseers of the poor. (For this subject, *see* "H-4"; "H-8, Almshouses, children in"; and "H-8, Poor relief.")

**4. WORKMEN'S COMPENSATION—EMPLOYER'S LIABILITY.**

(All provisions in which minors are specified; minor employed, illegally employed, etc.)

**5. MISCELLANEOUS.**

(In indexing preference is given to title "F-1.")

**6. EMPLOYMENT AGENCIES.**

(Provisions for children are specified.)

**7. EMPLOYMENT OF WOMEN (*see also* "F-1")—**

Before and after childbirth.  
Hours of labor.  
Minimum wage.  
Seats, etc., provisions for.

**(G) STATE, COUNTY, AND MUNICIPAL CARE OF CHILDREN; GENERAL PROVISIONS FOR ADMINISTRATION, SUPERVISION, AND MAINTENANCE:**

**1. STATE BOARDS OR DEPARTMENTS (names of boards, etc., specified, and each treated separately)—**

Creation and organization.

Jurisdiction, powers, and duties—

Children under direct control of. (*See also* "H-5.")

State and other institutions and agencies under control and jurisdiction of.

Miscellaneous—

Constitutional provisions.

Provisions for creating, etc.; funds for maintenance.

**2. COUNTY AND MUNICIPAL BOARDS OR AGENCIES.**

**(H) DELINQUENT, DEPENDENT, AND NEGLECTED CHILDREN (*see also* "G");**

**1. GENERAL—**

Acts which render child delinquent (certain specific acts, smoking cigarettes, carrying weapons, etc.).

Adult responsibility for delinquency and dependency. (*See also* "H-3.")

Capacity to commit crime.

Definitions—classes considered delinquent and dependent.

Delinquent and dependent, bringing into State.

Dependent and neglected, commitment and care of—

Court having jurisdiction, etc.

Certain provisions apart from juvenile court and institutional laws, which do not properly fall under subjects given below.

Miscellaneous.

**2. TREATMENT OF DELINQUENT MINORS APART FROM JUVENILE COURT AND INSTITUTIONAL LAWS—**

Court having jurisdiction.

Provisions for treatment of minors—

Above juvenile-court age (generally between 16 and 21).

In States having no juvenile-court law.

**3. JUVENILE COURTS—**

Creation, designation, and organization of court; appointment, term, and qualifications of judge, etc.

Jurisdiction—

Children of certain ages; delinquent and dependent as defined.

Of parents, guardians, etc.; of contributory delinquency and dependency, etc.

Extent of jurisdiction in general.

Probation officers—

Appointment, duties and powers, compensation, etc.

Referees, etc., appointment and duties of.

**(H) DELINQUENT, DEPENDENT, ETC., CHILDREN—Continued.****3. JUVENILE COURTS—Continued.****Procedure—**

Petition; summons; trial, how conducted, etc.; appeal, etc.

Release pending hearing; recognizance, detention homes, etc.

**Final disposition of child—**

Placing under probation—leaving child in its home, placing in a family home, etc., or committing to detention home, etc.

Commitment to an institution; powers and duties of institution to which committed.

Advisory board, appointment, organization, and duties of, etc.

Disqualification of child.

Contributory delinquency and dependency.

**Miscellaneous—**

Civil liability of child; medical care of child during proceedings, etc.

**4. INSTITUTIONS FOR DELINQUENTS AND DEPENDENTS—**

*(Name and kind of institution—State, county, municipal, semi-public, or private—is specified, and each is treated separately.)*

**Institutions for delinquents (State)—**

Establishment, organization, management, and maintenance. Supervision and inspection by State board, etc. (*See also* "G.")

Health and sanitation—regulations and inspection.

Object and jurisdiction of institution—

Age limitations.

Classes of children committed and received.

Courts or judges committing—

Procedure.

Term of commitment.

Jurisdiction and supervision after commitment.

Examination on entering institution; provisions for treatment.

Expenses and support, liability for (parent, county).

Treatment of inmates—

Exceptional offenders, special provisions for.

Defective children, transfer and removal of.

Correctional methods.

Education and training.

Employment in institutions.

Placing out and apprenticing of children.

Parole—Transfer—Discharge.

Miscellaneous.

*(County, municipal, semipublic, and private institutions are treated similarly; provisions for financing, State aid, etc., and for licensing of private institutions are specified.)*

**Institutions for dependents (State)—**

Establishment, organization, management, and maintenance.

Supervision and inspection by State board, etc. (*See also* "G.")

Health and sanitation—regulations and inspection.

**(H) DELINQUENT, DEPENDENT, ETC., CHILDREN—Continued.**

**4. INSTITUTIONS FOR DELINQUENTS AND DEPENDENTS—Contd.**

Institutions for dependents (State)—Continued.

Admission—Commitment—

Procedure.

Classes of children received.

Age limitations; how long retained, etc.

Physical and mental examinations upon entrance.

Delinquent children, transfer and removal of.

Expenses and support of child; payment by county, by parent.

Education and training; employment in institution.

Placing out—Apprenticing—Adoption.

Miscellaneous.

*(County, municipal, semipublic, and private institutions and agencies are treated similarly; provisions for financing, State aid, etc., and for licensing of private institutions and agencies are specified.)*

Institutions for delinquents and dependents.

(In indexing preference is given to the two preceding titles, unless the law clearly indicates that both classes are received in an institution. For subjects covered, see "Institutions for delinquents" and "Institutions for dependents" hereunder.)

Institutions in general.

(Certain constitutional and other provisions applying to institutions in general are specified.)

**5. PLACING OR BOARDING OUT OF CHILDREN (by State, county, or municipal boards)—**

Classes of children received.

Age limitations.

Authority of board over various classes.

Method of placing.

Placement agents, investigation, supervision, etc.

Provisions for temporary care.

**6. COUNTY AND MUNICIPAL RELIEF—**

Almshouses, children in.

Children born in institutions, disposition of.

Legal settlement of child. (*See* Poor relief, hereunder.)

Mothers' pensions.

Pensions, miscellaneous.

Poor relief.

School children, special aid to.

Support of family of inmate of penal or other institution.

Miscellaneous.

**(I) DEFECTIVE CHILDREN** (*see also "G"*) :**1. GENERAL PROVISIONS FOR DEFECTIVES—INSTITUTIONS FOR DEFECTIVES—**

*(Name and kind of institution—State, county, municipal, semi-public, or private—is specified, and each is treated separately.)*

**Blind, general provisions for—**

State commission for.  
 State aid to, within their homes.  
 Education of, in public schools.  
 Compulsory school attendance.  
 Books and readers for the blind, provisions for, by State.  
 Enumeration of, etc.

**Blind, institutions for (State)—**

Establishment, organization, management, and maintenance.  
 Supervision and inspection by State board, etc. (*See also "G."*)

Health and sanitation—regulations and inspection.

**Admission or commitment—**

Procedure.  
 Age limitations.  
 Classes of children received.  
 Compulsory commitment, etc.

**Custodial powers.**

Expenses and support of child; payment by county, by parent.

Education and training; employment in institution.

Expulsion—Transfer—Parole—Discharge.

Supervision or aid after leaving institution.

Miscellaneous.

*(County, municipal, semipublic, and private institutions are treated similarly; provisions for financing, State aid, etc., and for licensing of private institutions are specified.)*

**Crippled and deformed, general provisions for—**

Education in public schools; State aid to, etc.  
 Compulsory school attendance.

**Crippled and deformed, institutions and hospitals for (State hospital; State university hospital, etc.)—**

Duties of hospital official.  
 Assignment of competent surgeon to case.  
 Who may receive treatment—indigent and other children.  
 Expenses and support of child; payment by city, county, parent.

Miscellaneous.

*(For provisions for treatment and separate departments in institutions for dependents, see "H-4, Institutions for dependents.")*

**Deaf and dumb, general provisions for—**

Education in public schools; State aid to, etc.  
 Compulsory school attendance.

**(I) DEFECTIVE CHILDREN—Continued.**

**1. GENERAL PROVISIONS FOR DEFECTIVES—INSTITUTIONS FOR DEFECTIVES—Continued.**

Deaf and dumb, institutions for—

(For subjects covered, *see* "Blind, institutions for," hereunder.)

Diseased, general provisions for—

Education of tubercular children in open-air schools; State aid to, etc.

Miscellaneous.

Diseased, institutions for.

(For this subject, *see* "D-3.")

Feeble-minded and epileptic, general provisions for—

Commissions for studying treatment, needs, and care of.

Statistics relating to, etc.

Miscellaneous.

Feeble-minded and epileptic, institutions for.

(For subjects covered, *see* "Blind, institutions for," hereunder.)

Insane, hospitals for—

General provisions for admittance.

Provisions for children.

Miscellaneous.

Institutions in general.

(Certain constitutional and other provisions applying to all institutions for defectives are specified; in indexing preference is given to "Institutions in general," under Title "H-4.")

Miscellaneous.

**2. PREVENTION OF TRANSMISSION OF DEFECT—**

Asexualization.

Miscellaneous.

For marriage and divorce of feeble-minded, epileptic, etc., *see* "A-3"; for sexual crimes committed with defectives, *see* "C-1, Sexual crimes.")

**(J) MINOR'S CAPACITY OR INCAPACITY TO ACQUIRE RIGHTS AND TO INCUR LIABILITIES:**

**1. RIGHTS AND DISABILITIES IN GENERAL (MINOR'S CIVIL STATUS, ETC.)—**

Age of majority.

Capacity in which minor may act.

Capacity to appoint others to act.

Capacity to make a will.

Legal disability, what constitutes.

Legal disability, removal of.

Witnesses, minors as.

Miscellaneous.

**(J) MINOR'S CAPACITY OR INCAPACITY TO ACQUIRE RIGHTS  
AND INCUR LIABILITIES—Continued.**

**2. MISCELLANEOUS RIGHTS AND LIABILITIES—**

Actions. (For real actions, *see* "Real property" hereunder.)

Right of action, who has.

Capacity to sue and be sued; guardian ad litem, necessity and purpose of appointment, etc.

Procedure: Summons, how served, etc.

Effect of attaining majority during action.

Judgment; review of action, appeal, etc.

Limitation of actions.

Citizenship of minor.

Contracts.

Inheritance and testamentary rights. (For adopted and illegitimate children, *see* "A-4" and "A-5.")

Personal property.

Real property. (For care of property by guardian, *see* "B.")

Torts: Wrongs, liability for.

Miscellaneous.

















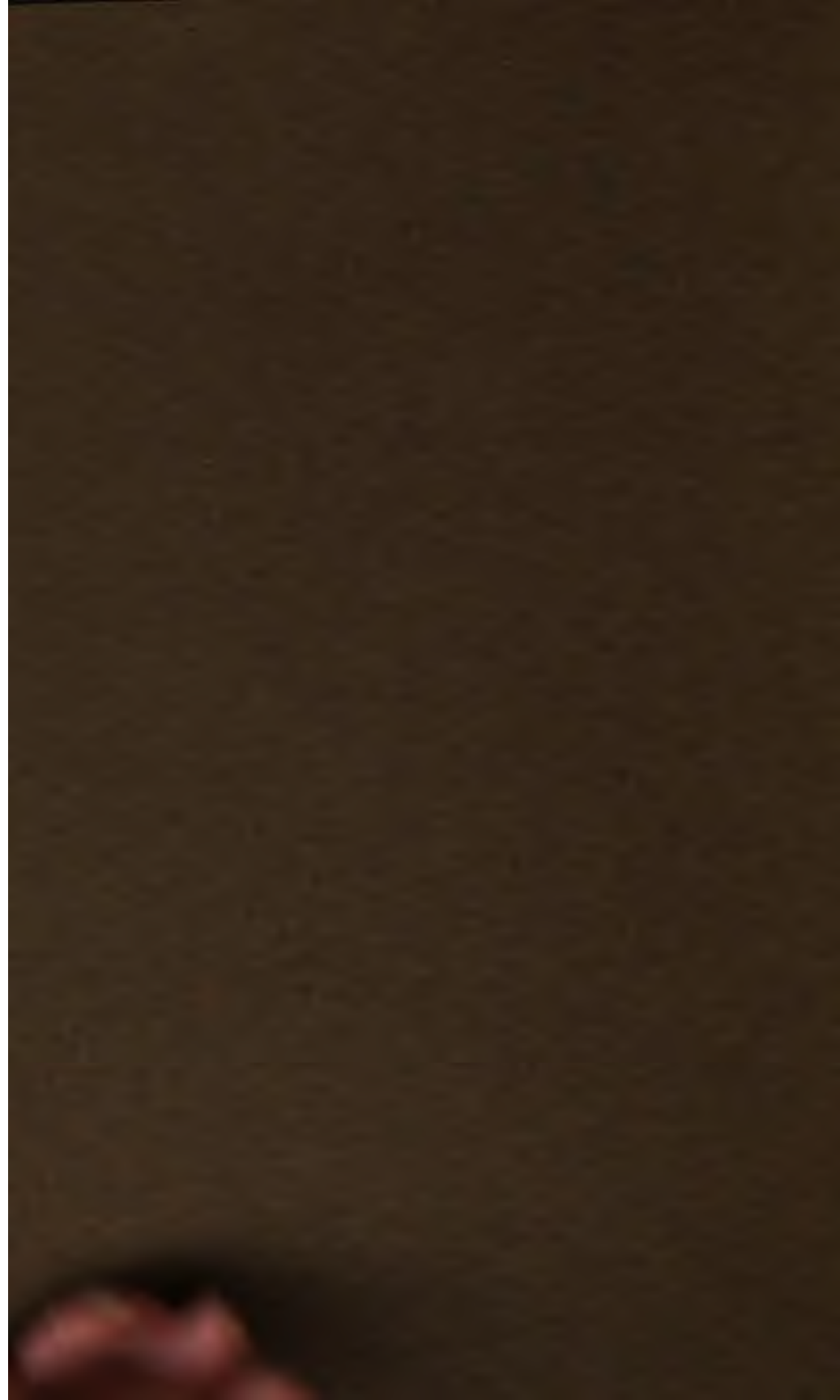






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